

September 15, 2014

Patrick O'Donnell
Clerk of the Legislature
State Capitol
Lincoln, NE 68509

Dear Mr. O'Donnell:

Nebraska Revised Statutes Section 43-534 requires every department, agency, institution, committee, and commission of state government concerned or responsible for children and families to submit, as part of the annual budget request, information about its programs, priorities and expenses to carry out family policy principles.

The Department of Health and Human Services is submitting DHHS Program Data and Information Forms from DHHS Divisions to comply with this statutory reporting requirement.

If you have questions, please contact me at 402-471-9433 or Bryson Bartels, Legislative Coordinator, at 402-471-0541. Thank you.

Sincerely,



Kerry T. Winterer
Chief Executive Officer
Department of Health and Human Services

DHHS Program Data and Information Form
Division of Behavioral Health
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Scot Adams

Contact #: 471-8553

1. Program name, mission, description, history

Program 038 Community-Based Aid

Mission: The purpose of Program 038 has been to provide financial support to community-based providers in areas of mental health, substance abuse, and gambling prevention and treatment services for persons without other resources such as insurance or Medicaid.

Description: Approximately $\frac{3}{4}$ of this program's \$100M budget is distributed to 6 regional behavioral health authorities, which in turn contract with private providers of behavioral health services. The other $\frac{1}{4}$ of this fund is spent in the areas of direct contracts between the Division and providers of service. Examples include: Native American tribes, Lasting Hope Recovery Center, community coalitions for prevention services.

History: The Division of Alcoholism was created in 1967. The Community Mental Health Division was created in 1973. Modern community-based services go back to LB302 and 204 in the mid-1970s. Problem gambling treatment and prevention services were begun in the 1990's but were transferred to Department of Revenue beginning July, 2013.

2. Program Manager:

Sheri Dawson is the Deputy Director for the Community Services Section in the Division of Behavioral Health. Phone number is 471- 7856.

3. Number of State Employees:

No state employees are funded from this budget. Employees in Program 268 provide monitoring oversight of this system.

4. Number of Clients Served by Program:

Approximately 32,000 people are provided direct treatment services through this program annually. An additional unknown number are served in prevention services and through a website, Network of Care.

5. Total Budget Amount:
\$ 93,840,356
6. Federal Funds: Yes
\$9,796,434
% of Budget: 10.4%
7. State General Funds: Yes
\$70,759,665
% of Budget: 75.4%
8. State Cash Funds: Yes
\$13,284,257
% Budget: 14.2%
9. Specified Tax Source:
No, however, a number of alcohol tax increases have accompanied increases in appropriations for substance abuse treatment services in the 70's, 80's, and 90's. Appropriations were always separate when the tax was generated.
10. Contract Private Providers for Services:
Number of providers: approximately 71
\$ contracted: \$93,840,356
of clients served: Approximately 32,000 direct treatment services
11. Grant Awarded by Program:
Not applicable.
12. Mandated Services:
State: Yes
Statute citation: Nebraska Behavioral Health Service Act, Neb. Rev. Stat. §§ 71-801 – 71-817. Specifically, Community-Based Services 71-810; Behavioral Health Services Fund 71-812
Oversight agency: Department of Health and Human Services, SAMHSA
13. Evidence-based performance assessment process in place by program
Yes and no.

Describe: Some behavioral health services are assessed on outcomes as well as process.
14. Additional information:

None.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Behavioral Health
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Scot Adams

Contact #: 471-8553

1. Program name, mission, description, history

Program 268 Community-Based Services Section, Division of Behavioral Health

Mission: The Division shall act as the chief behavioral health authority for the State of Nebraska and shall direct the administration and coordination of the public behavioral health system.

Description: The purpose of Community-Based Services Section (CBSS) monitors and provides oversight to the community-based mental health and substance abuse prevention and treatment services system. Activities include monitoring a hotline, contracting with regions, complying with federal block grant requirements, acquiring and analyzing data, planning, conducting audits, and promotion of activities in research and prevention.

History: The Division of Alcoholism was created in 1967. The Community Mental Health Division was created in 1973. Modern community-based services go back to LB302 and 204 in the mid-1970s. Problem gambling treatment and prevention services were begun in the 1990's but were transferred to Department of Revenue beginning July, 2013.

2. Program Manager:

Sheri Dawson is the Deputy Director for the Community Services Section in the Division of Behavioral Health. Phone number is 471-7856.

3. Number of State Employees:

26 positions in the Community-Based Services Section, Division of Behavioral Health.

4. Number of Clients Served by Program:

Nebraska Family Helpline Contract & 3,600 calls are directly served by the program. This is largely an administrative program to monitor and support Program 038.

5. Total Budget Amount:

\$4,466,101

6. Federal Funds: Yes
\$1,877,471
% of Budget: 42.0%
7. State General Funds: Yes
\$2,567,408
% of Budget: 57.5%
8. State Cash Funds: Yes
\$1,760
% Budget: < .00%
9. Specified Tax Source:
No.
10. Contract Private Providers for Services:
Number of providers: 15
\$ contracted: \$2,346,655
of clients served: 0
11. Grant Awarded by Program:
No.
12. Mandated Services:
State: Yes
Statute citation: Neb. Rev. Stat. §§ 71-801 – 71-817. Specifically, Community-Based Services 71-810
Oversight agency: Department of Health and Human Services, SAMHSA
Regulation citation:
13. Evidence-based performance assessment process in place by program

Yes, community-based services section monitors contract performance.
14. Additional information:

None.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Behavioral Health
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Scot Adams

Contact #: 471-8553

1. Program name, mission, description, history

Program 365 Regional Centers

Mission: Mission of the Regional Centers is to provide services to committed sex offenders, persons with mental illness involved in the criminal justice system (Forensics) and persons deemed too violent to be treated in the community-based setting.

Description: There are three regional center hospitals at Hastings, Norfolk, and Lincoln. Program 365 includes only Hastings and Lincoln. The Hastings Regional Center serves young men referred to it from the Kearney YRTC who are in need of chemical dependency treatment and those referred by Magellan Health Services after private providers have declined the referral. It has 24 bed capacity.

The Lincoln Regional Center has 240 beds and provides services to sex offenders, and forensic population, and persons too violent to be managed in a community-based setting. A subcomponent of the Lincoln Regional Center is known as "Whitehall" and serves adolescent sex offenders referred to it by the courts, Probation, the Office of Juvenile Services, and Children and Family Services.

History: Nebraska's regional centers were established the first year after Nebraska became a state. There have been significant reform efforts along its history, the most recent being LB1083 in 2004. This last reform effort sought to decrease the size and number of services at regional centers and to build up community-based services. Thus, in 1963, the highest regional center census was 4,883. Today's census of mental health patients including adolescents is approximately 240.

2. Program Administrator:

Bill Gibson, Chief Executive Officer of the Regional Centers. Phone number is (402) 984-9484.

3. Number of State Employees:

Approximately 609 positions exist at the Hastings and Lincoln Regional Centers.

4. Number of Clients Served by Program:
The census on September 6, 2014 was 9 at HRC and 215 at LRC.
5. Total Budget Amount:
\$ 46,589,253
6. Federal Funds: Yes
\$10,212,222
% of Budget: 21.9%
7. State General Funds: Yes
\$ 32,410,220
% of Budget: 69.6%
8. State Cash Funds: Yes
\$ 3,966,811
% Budget: 8.5%
9. Specified Tax Source:
No.
10. Contract Private Providers for Services:
Yes
Number of providers: 39
\$ contracted: Approximately \$ 2M
11. Grant Awarded by Program:
No.
12. Mandated Services:
State: Yes
Statute citation: Nebraska Behavioral Health Service Act, Neb. Rev. Stat. §§ 71-801 –
71-817 and § 83-338
Oversight agency: Division of Public Health (only licensure), The Joint Commission, and
CMS
13. Evidence-based performance assessment process in place by program
Yes
Describe: Joint Commission and CMS require performance based data, and Division of
Public Health.

14. Additional information:

None.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Behavioral Health
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Scot Adams

Contact #: 471-8553

1. Program name, mission, description, history

Program 870 Norfolk Regional Center Sex Offender Program

Mission: The mission of Norfolk Regional Center is to provide clinical services to committed sex offenders.

Description: The NRC is a 120-bed program for persons who are civilly committed for sex offense under LB1083 and more recently LB1199.

2. Program Administrator:

Bill Gibson, Chief Executive Officer of the Regional Centers, (402) 984-9484.

3. Number of State Employees:

Approximately 180 positions.

4. Number of Clients Served by Program:

Client census on September 6, 2014 is 85 sex offenders.

5. Total Budget Amount:

\$15,617,739

6. Federal Funds: No

\$0

% of Budget

7. State General Funds: Yes

\$15,544,306

% of Budget: 99.5%

8. State Cash Funds: Yes
\$72,914
% Budget: .5%
9. Specified Tax Source:
No.
10. Contract Private Providers for Services:
Number of providers: approximately 12
\$ contracted: \$1 Million
11. Grant Awarded by Program:
No.
12. Mandated Services:
State: Yes
Statute citation: Sex Offender Commitment Act. Neb. Rev. Stat. §§ 71-1201 – 71-1226.
Federal:
Oversight agency: Division of Public Health
13. Evidence-based performance assessment process in place by program
Yes.
14. Additional information:

None.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:
Assistance to the Aged, Blind, and Disabled (AABD) Special Rates

This information has been combined with AABD State Supplement information and is no longer considered a separate program.

This funding was added in 2001 and is used to supplement the AABD payment individuals in Licensed Assisted Living and Licensed Mental Health Centers receive. The purpose is to bring the room and board reimbursement rate for the providers of those settings closer to the actual cost. Increases only occur when there is Cost of Living Allowance (COLA) Increase by the Federal Government.

2. Program Manager and Phone Number:
Karma Stockwell, 402-471-9291

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program: 0

5. Total Budget Amount: \$0

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: 68-1001 requires AABD, LB543 from 2001 added the extra fund in the DHHS budget for the special rates.

Federal: No

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:

Aid to Dependent Children (ADC) also known as Temporary Assistance to Needy Families (TANF)

The purpose of ADC is to maintain dependent children in their own homes if possible and to assist parents to provide care essential to healthy growth and development of children. The Aid to Dependent Children (ADC) Program was established by Title IV-A of the Social Security Act. Public Law 104-193, the Personal Responsibility and Work Opportunity Act of 1996, replaced the federal entitlement program with a block grant program called Temporary Assistance for Needy Families (TANF). ADC is funded by a combination of federal and state money. The program population has slightly declined due to the improved economy.

2. Program Manager and Phone Number:

Betty Toelle 402-471-6661

3. # of State Employees:

Field staff salaries through cost allocation and two program specialists and one program manager.

4. # of Clients Served by Program:

SFY14 average monthly families 6,524

5. Total Budget Amount: \$27,770,945

6. Federal Funds: Yes

Amount: \$18,277,600

% of Budget: 66%

7. State General Funds: Yes

Amount: \$9,493,345

% of Budget: 34%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: 43-504; 68-309; 68-717

Federal: Yes

Oversight Agency: Administration for Children and Families / Office of Family Assistance

Regulation Citation: Title IV-A of the Social Security Act. Public Law 104-193, the

Personal Responsibility and Work Opportunity Act of 1996, replaced the federal entitlement program with a block grant program called Temporary Assistance for Needy Families (TANF).

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

ADC provides cash assistance to low-income families with minor children.

The basic payment standard is \$222 for one eligible individual. This increases by \$71 for each additional eligible family member.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Christine Jones

Contact #: 471-9254

1. Program Name, Mission, Description, History:
Adoption Incentive

Beginning in 1998, Section 473A of the Social Security Act (the Act) authorizes the payment of adoption incentive funds to States that increase the number of special needs children adopted from the foster care system. Whether an increase has occurred or not is determined each federal fiscal year, by comparing the number of children adopted in that year who meet the federal criteria against those numbers in the year designated by federal statute as the "base year". This funding has been used for purposes of enhancing services to children and families. Historically, we have received Adoption Incentive payments as follows: \$352,000 in FFY05; \$50,000 in FFY06; \$336,000 in FFY07; \$420,000 in FFY08; and \$569,917 in FFY09, \$720,000 in FFY10, \$0 in FFY11,\$0 in FFY12, and \$0 in FFY13.

2. Program Manager and Phone Number:
Christine Jones 471-9254

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
NA

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes
Amount:
% of Budget:

7. State General Funds: No
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: No
Providers:
\$ Contracted:
Clients Served:

11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:

12. Mandated Services
State: No
Statute Citation:

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: Section 473A of the Social Security Act (the Act)

13. Evidence-based Performance Assessment Process in Place by Program: NA
Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 9, 2014

Prepared by: Julie Hippen

Contact #: 471-1731

1. Program Name, Mission, Description, History:
Adult Protective Services:

The APS Act established a program designed to meet the needs of vulnerable adults and to assure the availability of the program to all eligible persons. It places authority and responsibility for investigations and interventions in situations of abuse/neglect/exploitation of vulnerable adults with the Department of Health and Human Services (DHHS) and local law enforcement agencies.

2. Program Manager and Phone Number: Sherri Haber, 471-7989

3. # of State Employees: 37

Social Services Block Grant (SSBG) partially pays for employee salaries.

There are thirty one (31) Adult Protective Service (APS) workers who maintain a dedicated caseload of Adult Protective Services cases. There are six (6) APS supervisors. There is one Program Specialist who provides support to Adult Protective Services and oversight of the Domestic Violence subgrants/contracts.

4. # of Clients Served by Program:

The Adult Protective Services hotline received 12,309 calls during calendar year 2013. The APS workers investigated 2911 allegations of abuse, neglect, and exploitation. 478 unique victims of substantiated abuse were served. 178 perpetrators were placed on the APS Central Registry.

5. Total Budget Amount: Total budget included in Program 347 SSBG Subprogram 40

6. Federal Funds: Yes

Amount:

% of Budget:

7. State General Funds: Yes

Amount:

% of Budget:

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NRS 28-352 Adult Protective Services Act

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe: The APS program is researching best practice models.

14. Additional Information: Adult Protective Services investigates reports of vulnerable adult abuse/neglect/exploitation, including self-neglect and intervenes when maltreatment is confirmed. Adult Protective Services are provided with as little disruption to the client's life as possible. Whenever possible, clients are helped to live in the environment of their choice.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: 09/11/2014

Prepared by: Emily Kluver

Contact #: 471-8424

1. Program Name, Mission, Description, History:

The Promoting Safe and Stable Families Program (PSSF), Title IV-B, Subpart 2 of the Social Security Act

Congress created and has continued to fund PSSF in response to concerns about the number of children in foster care and the effect of instability and lack of permanency on their well-being. The statute describes four service categories that correspond to families at various levels of need. Family Support Services are aimed at improving parenting, strengthening parental relationships, promoting health marriages and enhancing child development. Family Preservation Services are targeted to families in crisis. Time-Limited Family Reunification Services help families that are seeking to address the conditions that led to removal of a child. Adoption Promotion and Support Services help families that are preparing to adopt or that have adopted a child from foster care.

Historically, the Department has contracted with the Nebraska Children and Families Foundation to provide the Family Preservation and Family Support Services. The remainder of the funds has been used for contracts to provide support services to families, foster families, and adoptive families; contracts for completion of home studies; and pre-hearing conferences.

2. Program Manager and Phone Number:

Emily Kluver, 471-8424

Nanette Simmons, 471-9457

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

- Family Support & Family Preservation: FFY 2012-2013 served 8,423 children directly
- Pre-Hearing Conferences: SFY 2013-2014 Q1 and Q2: Families served 274
- NFAPA SFY 2013-2014: 4733 Foster Care Inquiry Calls, 5942 Mentor Contacts, 129 participants completed Foster Parent Pre-Service Training; and 617 participants attended NFAPA facilitated in-service trainings.

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes
Amount:
% of Budget:
7. State General Funds: No
Amount:
% of Budget:
8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers:
Providers: 3
\$ Contracted FFY 2013: \$1,240,242
Clients Served:
 - Family Support & Family Preservation: FFY 2013 served 8,423 children directly
 - Pre-Hearing Conferences: SFY 2013-2014 Q1 and Q2: Families served 274
 - NFAPA SFY 2013-2014: 4733 Foster Care Inquiry Calls, 5942 Mentor Contacts, 129 participants completed Foster Parent Pre-Service Training; and 617 participants attended NFAPA facilitated in-service trainings.
11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:
12. Mandated Services
State: No
Statute Citation:

Federal: Yes No
Oversight Agency: Administration for Children and Families
Regulation Citation: Title IV-B, Sub-part 2 of the Social Security Act
13. Evidence-based Performance Assessment Process in Place by Program: Yes No
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: 9-8-14

Prepared by: Deanna Brakhage

Contact #: 402-471-9331

1. Program Name, Mission, Description, History:

Name of Program: Bridge to Independence

Mission: Bridge to Independence endeavors to provide young people aging out of foster care a smooth transition to adulthood with developmentally appropriate support, youth-directed services and a broad safety net that allows young people to learn the life lessons they need to become independent.

Description: The purpose of the Young Adult Bridge to Independence Act is to support former state wards in transitioning to adulthood, becoming self-sufficient, and creating permanent relationships. The Bridge to Independence Program shall at all times recognize and respect the autonomy of the young adult.

History: LB 216 was passed into law and signed by the Governor on June 4, 2013. Governor Heieman approved regulations on May 12, 2014. On August 21, 2014 the Children's Bureau ACYF approved Nebraska IV-E Plan. Implementation of the Program will begin by October 20, 2014.

2. Program Manager and Phone Number: Deanna Brakhage 402-471-9331

3. # of State Employees: 17

- 11- Independence Coordinators
- 2- Independence Coordinator Supervisors
- 1- Income Maintenance Workers
- 1- Program Specialist
- 2- Legal staff

4. # of Clients Served by Program: 0

The program has not been implemented yet. Implementation date is scheduled for October 2014.

5. Total Budget Amount: \$2,276,273

6. Federal Funds: Yes
Amount: \$1,227,755
% of Budget: 53.94%

7. State General Funds: Yes
Amount: \$1,048,518
% of Budget: 46.06%

8. State Cash Funds:
Amount:
% of Budget:

9. Specified Tax Source:
Name:
\$ Amount:

10. Contract with Private Providers:
Providers: 0
\$ Contracted: N/A
Clients Served: N/A

11. Grant Awarded by Program:
Grantees:
\$ Grants:
Clients Served:

12. Mandated Services:
State:
Statute Citation: Ne. Rev. Stat. 43-4501-43-4514

Federal: Fostering Connections to Success and Increasing Adoptions Act of 2008
Oversight Agency:
Regulation Citation: ACYF-CB-PI-10-11

13. Evidence-based Performance Assessment Process in Place by Program:
Describe: At this time DCFS has not implemented an evidence-based practice model/assessment tools.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 9, 2014

Prepared by: Connie Pfeifer

Contact #: 402-471-9245

1. Program Name, Mission, Description, History:

Child Abuse Prevention and Treatment Act (CAPTA)

CAPTA funding is utilized to improve the intake, assessment, screening, and investigation of reports of child abuse and neglect; creating and improving the use of multidisciplinary teams and interagency protocols to enhance investigations; enhancing the general child protective system by improving risk and safety assessment tools and protocols, automation systems that support the program and track reports of child abuse and neglect from intake through final disposition and information referral systems; developing and facilitating training protocols for individuals mandated to report child abuse or neglect; developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.

2. Program Manager and Phone Number:

Connie Pfeifer 402-471-9245

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

NA

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes

Amount:

% of Budget:

7. State General Funds: No

Amount:

% of Budget:

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

\$ Contracted:

Clients Served:

~~11.~~ Grant Awarded by Program Yes

Grantees: 7 subgrants and additional funds used to support child abuse prevention activities.

\$ Grants: \$191,120 (Please double check this number)

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NRS 28 - 728

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: The Child Abuse Prevention and Treatment Act (CAPTA) was amended by Public Law 108-36, Keeping Children and Families Safe Act of 2003, requires States to develop a five year plan for improvement of their child protective services systems and consolidate that plan with their Child and Family Services Plan (CFSP).

13. Evidence-based Performance Assessment Process in Place by Program:

Describe:

14. Additional Information:

Nebraska's CAPTA "primary program area selected" is the improvement of the agency's ability to provide an effective and immediate response from the Division of Children and Family Services for children and families who are involved in the child welfare system. .

CAPTA funding is also used to assist the seven child advocacy centers

CAPTA funding will continue to support the three mandatory Nebraska Citizen Review Panels.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 9, 2014

Prepared by: Nathan Busch

Contact #: 402-471-1791

1. Program Name, Mission, Description, History:
Promoting Safe and Stable Families Caseworker Visits

This is a formula grant to support quality, monthly caseworker visits with children in foster care and their families.

2. Program Manager and Phone Number:
Nathan Busch 402-471-1791

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program: the funding does not specifically serve clients but provides for supports for DHHS staff to visit children and parents.

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes
Amount:
% of Budget:

7. State General Funds: No
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: Title IV-B, Sub-part 2 of the Social Security Act

13. Evidence-based Performance Assessment Process in Place by Program: NA

Describe:

14. Additional Information: Funding has been used to purchase monthly on-going CQI system support to measure and improve quality of caseworker visits with children and parents.

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Deanna Brakhage

Contact #: (402) 471-9331

1. Program Name, Mission, Description, History:

Independent Living

This program offers assistance to help current and former foster care youth achieve self-sufficiency. Activities and programs include, but are not limited to, help with education, employment, financial management, housing, emotional support and assured connections to caring adults. The program is intended to serve youth who are likely to remain in foster care until age 19, youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption, and young adults ages 19-21 who have "aged out" of the foster care system.

2. Program Manager and Phone Number:

Deanna Brakhage 471-9331

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

Approximately over 435

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes

Amount:

% of Budget:

7. State General Funds: No

Amount

% of Budget:

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 5 Providers

\$ Contracted: \$1,700,005.00

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: Foster Care Independence Act of 1999 Title I

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program Name, Mission, Description, History:

Child Care Subsidy Program

The Child Care Subsidy Program is to assist low income families with child care. The Child Care and Development Block Grant Act established the Child Care Subsidy Program as a block grant in 1992. These subsidies are paid directly to Child Care providers at rates based on the Biannual Child Care Market Rate Survey completed by DHHS. In 1996 it was amended by the Personal Responsibility and Work Opportunity Reconciliation Act to give states more flexibility in addressing child care needs. State Authority: In Neb. Rev. Stat. Section 43-2602, the Legislature stated its intent to develop a comprehensive child care system.

2. Program Manager and Phone Number:

Nicole Vint 402-471-9208

3. # of State Employees:

Field staff salaries through cost allocation and two program specialists and partially funded program manager.

4. # of Clients Served by Program:

SFY14 Unduplicated 32,096 (NFOCUS)

5. Total Budget Amount: \$99,217,124

6. Federal Funds: Yes

Amount: \$40,106,691

% of Budget: 40.4%

7. State General Funds: Yes

Amount: \$59,110,433

% of Budget: 59.6%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program Yes

Grantees: Early Head Start Infant/Toddler Initiative: 5 sub grants, Nurturing Healthy Behaviors Sub grants: 3 sub grants, Community Learning Centers Sub grant: 1 sub grant, Public Awareness Campaign: 1 sub grant, Direct grants to Child Care Programs

\$ Grants: Child Care Grants \$250,000, Early Head Start Infant/Toddler Initiative \$150,000, Nurturing Healthy Behaviors (3) \$401,120 for two-year periods.

Clients Served: 2280

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Stat. 43-2623 thru 2625)

Federal: Yes

Oversight Agency: Administration for Children and Families, Office of Child Care Regulation Citation: Title IV-A of the Social Security Act. Public Law 104-193, the Personal Responsibility and Work Opportunity Act of 1996 State Authority.

13. Evidence-based Performance Assessment Process in Place by Program: Yes Describe:

Early Head Start Infant/Toddler Initiative uses evidence based evaluation tools to measure the quality of care offered by Head Start and Infant/Toddler programs; Nurturing Healthy Behaviors subgrants are evaluated using evidenced-based assessments.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Support Enforcement
Fiscal Year 2013-2014

Date: 9-10-2014

Prepared by: Byron Van Patten

Contact #: 471-7312

1. Program Name, Mission, Description, History:
Child Support Enforcement

In 1975 Congress passed and the President signed legislation which created title IV-D of the Social Security Act. Among the requirements of the bill, states were required to develop a Child Support Program. The Nebraska Child Support Enforcement Program (CSE) is a Federal, State and County program which helps Nebraskans by assisting children and their families to receive the financial support they deserve. To achieve this goal, CSE provides the following services: Locating Parents; Establishing Paternity; Establishing Child Support Orders; Establishing Medical Support Orders; Enforcing Child Support Orders; Enforcing Medical Support Orders; Enforcing Spousal Support Orders; Review and Modification of Court Orders; Receipt and Distribution of Support Collections.

2. Program Manager and Phone Number:
Byron Van Patten 471-7312

3. # of State Employees:
99 FTE

4. # of Clients Served by Program:
In SFY 2014 (July 1, 2013 through June 30, 2014) Nebraska Child Support Enforcement (CSE) had a caseload of 106,611. Of that, 92,901 cases (87.14%) had a court order established. \$216,618,451 was distributed to those court ordered cases.

5. Total Budget Amount: \$12,743,629

6. Federal Funds: Yes
Amount: \$8,560,925
% of Budget: 66%

7. State General Funds: Yes
Amount: \$4,322,704
% of Budget: 34%

8. State Cash Funds: No
Amount: \$0.00
% of Budget: 0%

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: Yes

Providers: Child Support Enforcement has significant contracts with the following. All of which are paid with a combination of State and Federal Funds. Among those are:
Young Williams Inc, - \$5.9 million dollars per year for child support services in Douglas County and 1.3 million dollars per year for the Call Center in Wausa.

DNA Diagnostics Center - Genetic Testing, 30 dollars per individual (\$122,820.00 SFY14)

MAXIMUS/Policy Studies – New Hire Reporting, 22 cents per report (\$124,509.00 SFY14)

Health Management Services – Health insurance match information, 25 dollars per report
\$155,075.00 SFY14)

Informatix- Bank account match information - \$40,187.00 SFY14

\$ Contracted:

Clients Served:

11. Grant Awarded by Program: Yes, a Federal Access and Visitation Grant (100%) federal funds.

Grantees: 7

Mediation West), Scottsbluff -\$9,500

Central Mediation Center, Kearney -\$13,500

Concord Center, Omaha - \$18,500

Nebraska Mediation Center, Fremont - \$10,000

The Mediation Center, Lincoln - \$13,500

The Resolution Center, Beatrice - \$12,000

Crisis Center Inc., Grand Island - \$21,000

Grants: 1

Clients Served: 510 during the most recent federal fiscal year

12. Mandated Services

State: Yes No

Statute Citation:

Federal: Yes

Oversight Agency:

Regulation Citation: Section 454(4)(ii) of the Social Security Act 45 CFR 302.33

13. Evidence-based Performance Assessment Process in Place by Program: No
Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 9, 2014

Prepared by: Nathan Busch

Contact #: 402-471-1791

1. Program Name, Mission, Description, History:
Child Welfare Services

The Child Welfare System works collaboratively to ensure that the abused, neglected and dependent populations that it serves are safe from harm or child maltreatment; in a permanent healthy nurturing and caring environment; with a stable family; that the effects of harm to the child or youth are diminished. This funding is intended to promote state flexibility to develop and expand the program of services to children and families to:

- Protect and promote the welfare of all children;
- Prevent child abuse and neglect
- Permit children to remain in their own homes, or return to those homes whenever it is safe and appropriate;
- Promote safety, permanency, and well-being for children in foster care or those in adoptive families; and
- Provide training, professional development, and support to ensure a well-qualified child welfare workforce.

2. Program Manager and Phone Number:
Nathan Busch 402-471-1791

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 Unduplicated 11,533 (NFOCUS)

5. Total Budget Amount: \$125,985,339

6. Federal Funds: Yes
Amount: \$10,459,724
% of Budget: 8.3%

7. State General Funds: Yes
Amount: \$113,003,338
% of Budget: 89.7%

8. State Cash Funds: Yes
Amount: \$2,522,277
% of Budget: 2.0%

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: Yes
Providers: 96
Clients Served: SFY 2013: 12,615

11. Grant Awarded by Program No
Grantees:
Grants:
Clients Served:

12. Mandated Services
State: Yes
Statute Citation: Neb. Rev. Statutes 43-707 & 43-708

Federal: Yes
Oversight Agency: Administration for Children and Families
Regulation Citation: Title IV-A & IV-E of the Social Security Act

13. Evidence-based Performance Assessment Process in Place by Program: Yes
Describe: Services are based on evidence based or evidence informed practices.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Connie Pfeifer

Contact #: 402-471-9245

1. Program Name, Mission, Description, History:

Children's Justice Act (CJA) Child Abuse Investigation & Prosecution

CJA funding supports activities undertaken to improve the investigative, administrative and judicial handling of cases of child abuse and neglect, particularly child sexual abuse and exploitation. Also included are cases involving suspected child maltreatment related fatalities, and cases involving a potential combination of jurisdictions, including a discussion of how these improvements have reduced or will reduce additional trauma to the child victim; steps taken to establish experimental, model or demonstration programs to improve the prompt and successful resolution of civil and criminal court proceedings, or to enhance the effectiveness of judicial and administrative action in child abuse cases, particularly child sexual abuse and exploitation cases; and activities undertaken to reform State laws, ordinances, regulations, protocols or procedures to protect children from abuse, particularly child sexual abuse and exploitation.

2. Program Manager and Phone Number:

Connie Pfeifer 402-471-9245

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program: In 2012, 641 Court Appointed Special Advocates (CASA) volunteers in 22 programs across 36 counties served 1,394 children. The Nebraska Alliance of Child Advocacy Centers provided training to over 8,500 medical providers, law enforcement officers, and other professionals. Seven Child Advocacy Centers located across Nebraska conducted forensic interviews, provided medical evaluations, advocacy and support services, therapeutic intervention, case reviews and tracking for over 4,500 child victims and their families. The goal is to ensure that children are not re-victimized by the very system designed to protect them.

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes

Amount:

% of Budget:

7. State General Funds: No
Amount:
% of Budget:
8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: Yes
Providers: 1
Children’s Center on Child Delinquency \$8,728.62 for Structured Decision Making®
Clients Served:
11. Grant Awarded by Program Yes
Grantees: 9
\$ Grants: 7 Child Advocacy Centers \$31,319
Nebraska Alliance of Child Advocacy Centers \$64,792
Nebraska Children and Families Foundation to support CASA programs \$18,628
(Additional funds held back for travel, conference, etc.)
Clients Served:
12. Mandated Services
State: Yes for Child Advocacy Centers
Statute Citation: NRS 28-728
- Federal: Yes
Oversight Agency: Administration on Children, Youth and Families
Regulation Citation: The Fund is administered by the U.S. Department of Justice, Office of Victims of Crime (OVC) and the grants are awarded by the Administration on Children, Youth and Families, U.S. Department of Health and Human Services, as outlined in Section 107 of the Child Abuse Prevention and Treatment Act (CAPTA), as amended, by the Keeping Children and Families Safe Act of 2003.
13. Evidence-based Performance Assessment Process in Place by Program:
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare and Office of Juvenile Services
Fiscal Year 2013-2014**

Date: 09/10/14

Prepared by: Tony Green

Contact #: 471-8403

1. Program Name, Mission, Description, History:
Community Based Services – Program 345

This program provides for juvenile community-based services and programs that address community safety, youth accountability, treatment, and rehabilitation for juveniles committed to DHHS-OJS. Program 345 provides funding for programs and services that include: tracker services, electronic monitoring, urinalysis testing, detention, commercial transportation, family support services, intensive family preservation, and day reporting centers. This program also funds psychiatric services for juveniles at the Youth Rehabilitation and Treatment Centers in Geneva and Kearney.

This program was eliminated in FY13/14 as a result of Legislative Bill 561. A small amount of money was left in the program to capture any carry-over costs from SFY13.

2. Program Manager and Phone Number:

Tony Green, 471-8403

3. # of State Employees: N/A

4. # of Clients Served by Program: 1,084 juveniles

5. Total Budget Amount: \$1,639,296

6. Federal Funds: No

Amount:

% of Budget:

7. State General Funds: Yes

Amount: \$1,639,296

% of Budget: 100%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 96

\$ Contracted: \$1,639,296

Clients Served: 2,041 juveniles

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Statutes 43-401 to 43-423

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: N/A

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Jennifer Dreibelbis

Contact #: 471-9346

1. Program Name, Mission, Description, History:
Community Services Block Grant (CSBG)

The mission of the Community Services Block Grant is to reduce poverty, revitalize low-income communities, and promote self-sufficiency through local intervention. The Community Services Block Grant Program was created by the Economic Opportunity Act of 1964 and amended by Public Law 105-285, cited as the Coats Human Services Reauthorization Act of 1998. Some of the services and activities currently offered by CAAs include employment and job training services and supports, educational services such as pre-school, Head Start and GED, budgeting and financial counseling and training, housing supports including home repair, rental deposits and landlord/tenant mediation, direct assistance including food, and clothing, and transportation, and other personal counseling and referral to other services.

Community Services Block Grant provides 90% of its federal funding to Nine Community Action Agencies (CAA). Five percent of the funding supports innovative Community Action Agency activities and training and technical assistance to agencies that may be struggling. Five percent of the funding supports CSBG Administration activities including 1 full time staff member and related administration expenses.

2. Program Manager and Phone Number:

Jodie Gibson, 471-1069

3. # of State Employees: 1 FTE

This position is supported by 100% federal funds.

4. # of Clients Served by Program:

FFY2013 79,385

5. Total Budget Amount: \$5,777,546

6. Federal Funds: Yes

Amount: \$5,777,546

% of Budget: 100%

7. State General Funds: No

Amount:

% of Budget:

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program Yes

Grantees: 9 grants awarded to community action agencies.

\$ Grants: 90% of the funds. Discretionary grants vary by year using 5% of the funds.

Clients Served: CAAs: FFY 2013 79,385; Discretionary: variable

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: Office of Community Services, Administration for Children and Families, US DHHS.

Regulation Citation: Economic Opportunity Act of 1964. The Community Services Block Grant Act of 1981 as amended by Section 680(a)(2) of the Community Opportunities, Accountability, and Training and Educational Services Act of 1998 (P.L. 105-285).

13. Evidence-based Performance Assessment Process in Place by Program: Yes

Describe:

Nebraska participated in a national pilot project to test the proposed CSBG Performance Standards. Four agencies participated and their aggregate scores are available. It is unknown whether specific approaches in carrying out programs are evidence based. Agencies are required to produce a community needs assessment at least once every three years and have specific performance guidelines set out by Results Oriented Management and Accountability (ROMA) and must provide targets for achieving outcomes. ROMA is being revised in FFY2014 for implementation in FFY2017 to include more evidence based and better outcome reporting for agencies. Information is not available at this time about whether or not the programs implemented in relation to those outcomes are evidence based.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014**

Date: September 11, 2014

Prepared by: Julie Hippen

Contact #: 471-1731

1. Program Name, Mission, Description, History:

Domestic Violence and Sexual Assault Prevention and Services program is supported by three funding sources.

- Reverted back to Division of Public Health.
- Family Violence Prevention and Services
- State General Funds

The mission of the program is to:

- Provide abused family and household members necessary services including shelter, counseling, social services, and limited medical care and legal assistance.
- Prevent family violence and provide immediate shelter and related assistance for victims of family violence and their dependents.

This funding supported 21 statewide and 4 tribal domestic violence programs. Programs offer domestic violence and sexual assault prevention programs, emergency services, shelter and related services such as transportation, emergency financial aid, crisis counseling, court/legal, medical, housing, and personal advocacy for victims of domestic abuse or sexual assault and their dependents. Services such as batterer intervention programs are offered as well.

2. Program Manager and Phone Number:

Julie Hippen, 471-1731

3. # of State Employees:

The grant funding sources does not pay for employee salaries.

There is one program specialist who provides support to Adult Protective Services and oversight of the domestic violence subgrants and contracts.

4. # of Clients Served by Program:

Timeframe: 10-1-2012 to 9-30-2013

Women: 12,013

Men: 1,031

Children: 6,960

Shelter Nights: 60,816

Unmet requests for Shelter: 2,060

Batterer Intervention Services: 201 Males

Data source: Annual Report for FY13 submitted to the Family Violence Prevention and Services Administrator.

5. Total Budget Amount: \$2,570,383
6. Federal Funds: Yes
Amount: \$1,223,083
% of Budget: 47.6%
7. State General Funds: Yes
Amount: \$1,347,300
% of Budget: 52.4%
8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: Yes
Providers: 1 Nebraska Domestic Violence Sexual Assault Coalition (NDVSAC).
\$ Contracted: \$15,000 October 1, 2012 to September 30, 2013 from the Federal Violence Prevention and Services grant.
Amendment 1: October 1, 2012 to February 28, 2014
Amendment 2: March 1, 2014 to June 30, 2014

Payments are based on their submission of their deliverables.
Term of Contract October 1, 2012 to June 30, 2013: \$43,500 of CFS Administrative funds to provide technical assistance to the domestic violence programs, update program standards, collect data and prepare the annual report and application.
11. Grant Awarded by Program Yes
Grantees: 26 (21 providers across the state, 4 tribal programs, and the Nebraska Domestic Violence Sexual Assault Coalition)
\$ Grants: \$ 2,255,066
12. Mandated Services
State: Yes
Statute Citation: Sections 42-901 to 42-931 shall be known and may be cited as the Protection from Domestic Abuse Act.

Federal: Yes
Formula Grant
Oversight Agency: Administration of Children and Family Services

Regulation Citation: Family Violence Prevention and Services Act (FVPSA) - First authorized as part of the Child Abuse Amendments of 1984 (PL 98-457), FVPSA has been amended eight times. It was most recently reauthorized for five years by the CAPTA Reauthorization Act of 2010 (PL 111-320).

13. Evidence-based Performance Assessment Process in Place by Program: Yes
Describe:

Family Violence Prevention and Services requires outcome data collection and reporting.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 15, 2014
Prepared by: Sharon Johnson
Contact #: 471-1764

1. Program name, mission, description, history

DPFS – Disabled Persons and Family Support Program

Mission:

The goals of the program are to assist employed adults with disabilities, help families stay together, and help individuals with disabilities to live independently. Program serves individuals with medically determinable severe, chronic disability with a demonstrated need for service, income below NE median family income, and insufficient resources to provide for the total cost of care for disabled family member.

History:

Legislation enacted in 1981.

2. Program manager, phone number: Sharon Johnson, 471-1764
3. # of State Employees: 1.75 FTE in Central Office
4. # of clients served by program: 419 persons served in SFY 2014
5. Total Budget Amount: \$910,000 SFY 2014.
6. Federal Funds yes no
7. State General Funds yes no
\$869,929.94 in general funds expended for SFY 2014
% of budget: 100%
8. State Cash Funds yes no
9. Specified Tax Source yes no
10. Contract with private providers for services yes no
11. Grant awarded by program yes no

12. Mandated services
State: **X** yes ___ no
Statute citation: Nebraska State Statute Sections 68-1501 through 68-1519
Federal yes **X** no
Oversight agency: NE DHHS/ Division of Children and Family Services/Economic Assistance Unit
Regulation citation: NAC Title 472

13. Evidence-based performance assessment process in place by program
yes **X** no

Describe: Client-directed program requires client/representative to approve/disapprove providers based upon personal satisfaction with service delivery.

14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: 09/11/2014

Prepared by: Emily Kluver

Contact #: 471-8424

1. Program Name, Mission, Description, History:

Education Assistance for State Wards

Costs associated with the education of wards of the Department or of any court who are in out-of-home care. Payment is made under specific circumstances directly to schools or a facility that has a school. The Department of Health and Human Services determines eligibility and makes payments, using rates established by the Department of Education. Rates are re-calculated for each school year (Fall and Spring Semesters, and Summer School). The bases for this program are Neb. Rev. Stat. 79-215, 83-108.04, and 43-2. Statutes, 1943.

2. Program Manager and Phone Number:

Emily Kluver, 471-8424

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

SFY 2013-2014 # of schools or facilities receiving payment: 27

5. Total Budget Amount: \$17,540,376

6. Federal Funds: No

Amount:

% of Budget:

7. State General Funds: Yes

Amount: \$17,540,376

% of Budget: 100.0%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Stat. 79-215, 83-108.04, and 43-2. Statutes, 1943

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: NA

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2013

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program Name, Mission, Description, History:
Emergency Assistance

The purpose of Emergency Assistance is to provide money and/or services to or on behalf of a needy child(ren) and any other members of the household to meet needs that have been caused by an emergency situation when the needs cannot be met because of destitution. The program provides a means to deal with financial situations that are threatening the health or well being of an eligible child and family. Emergency Assistance benefits must be used to help return the family to a stable environment that they will be able to maintain.

2. Program Manager and Phone Number:
Betty Toelle 471-6661

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 average monthly 90

5. Total Budget Amount: \$1,438,126

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$1,438,126
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NRS 68-128, 68-717

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:
Emergency Food Distribution Program

The Emergency Food Assistance Program (TEFAP) is a program that acts as a pass through for USDA commodities to Food Banks and Food Pantries. Our department orders food based on a grant from USDA and then passes the food on to the food banks and pantries. DHHS also receives a money grant to pay the expenses of the foods (warehousing, and transportation). The agencies also use the grant to help the Food Banks defray their costs.

2. Program Manager and Phone Number:
Chad Mohr – 402-471-9644

3. # of State Employees:
Three state employees, one program coordinator, one business manager and one staff assistance II.

4. # of Clients Served by Program:
There are approximately 155 food banks and pantries across Nebraska who distribute food to those in need. Due to the nature of the program the actual number of participations is unknown.

5. Total Budget Amount: \$202,806

6. Federal Funds: Yes
Amount: \$202,806
% of Expenditures: 100%

7. State General Funds: No
Amount:
% of Expenditures:

8. State Cash Funds: No
Amount:
% of Expenditures:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program Yes

Grantees: 2

\$ Grants: \$202,806

Clients Served: See #4

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: USDA Food and Nutrition Services

Regulation Citation: Section 32 of the Agricultural Act of 1935, Section 416 of the Agricultural Act of 1949 and Section 6 of the Child Nutrition Act as amended in 1975

13. Evidence-based Performance Assessment Process in Place by Program: Yes

Describe: Audits done by Food Distribution and the Department of Education Nutritional Services

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 9, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:
Employment First

The primary purpose of Employment First is to provide temporary, transitional support for Nebraska families so that economic self-sufficiency is attained in as expeditious a manner as possible through the provision of training, education and employment preparation. Individuals involved with Employment First are required to participate in countable work activities for a minimum of 20, 30, or 35 hours per week, based on the age of their children. Countable work activities include: Employment, Work Experience, On-the-Job Training, Job Search/Job Readiness, Community Service, Vocational Training and Post Secondary Education.

Funding for the Employment First program is through the TANF program.

2. Program Manager and Phone Number:
Betty Toelle 402-471-661

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 average monthly 6,413

5. Total Budget Amount: \$21,438,522

6. Federal Funds: Yes
Amount: \$14,795,262
% of Budget: 69%

7. State General Funds: Yes
Amount: \$6,643,260
% of Budget: 31%

8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: Yes
Providers: 2 providers but 6 separate contracts based on service areas
\$ Contracted: \$12,733,545
Clients Served: 6,413
11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:
12. Mandated Services
State: Yes
Statute Citation: NRS 43-504.01; 43-512

Federal: Yes
Oversight Agency: Administration for Children and Families/Office of Food Administration
Regulation Citation: Title IV-A of the Social Security Act. Public Law 104-193, the Personal Responsibility and Work Opportunity Act of 1996, replaced the federal entitlement program with a block grant program called Temporary Assistance for Needy Families (TANF).
13. Evidence-based Performance Assessment Process in Place by Program: Yes
Describe: Contracts contain deliverables which must be met in order to retain full payment.
Monitoring occurs on the Service Area level.
14. Additional Information:

Involvement in Employment First activities is an eligibility requirement for adults receiving Aid to Dependent Children (ADC) cash assistance (TANF).

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Deanna Brakhage

Contact #: (402) 471-9331

1. Program Name, Mission, Description, History:
Education and Training Voucher (ETV)

The Chafee ETV Program makes financial resources, available to meet the postsecondary education and training needs of youth aging out of foster care and enrolled in a qualified higher education program. The program was established in 2001 by Congress as part of a reauthorization of the Promoting Safe and Stable Families Act. The Chafee ETV Program makes vouchers of up to \$4,000 per year available to young adults coming from foster care to support their costs of attending institutions of higher education, as defined in the Higher Education Act of 1965. Nebraska began the ETV program in 2004.

2. Program Manager and Phone Number:
Deanna Brakhage 471-9331

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program: 370

5. Total Budget Amount: Total budget included in Program 354

6. Federal Funds: Yes
Amount:
% of Budget:

7. State General Funds: No
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 1, Central Plains Center for Services

\$ Contracted: \$584,088.00

Clients Served: 370

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency:

Regulation Citation: The Promoting Safe and Stable Families Amendment of 2001-section 477 of the Social Security Act,

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program Name, Mission, Description, History:

**Supplemental Nutrition Assistance Program (SNAP – formerly known as Food Stamps)
Employment and Training Program**

The Supplemental Nutrition Assistance Program (SNAP – formerly known as Food Stamps) is required by Federal regulations to offer a job search training and support program. In Nebraska this program is call Employment and Training (E&T). It is designed to assist participants in entering the labor market by providing them with the knowledge and skills needed to secure employment leading to self-sufficiency. Participation in the E&T program is voluntary in Nebraska and serves clients in Kearney and the surrounding area. Supportive services in the form of bus tickets and gas vouchers are available to participants.

2. Program Manager and Phone Number:

Samantha Pfister 402-471-9267

3. # of State Employees:

1 fully federally funded FTE.

4. # of E&T Clients Served by Program:

SFY14 average monthly 14

5. Total Budget Amount: \$1,072,610

6. Federal Funds: Yes

Amount: \$887,215

% of Budget: 83%

7. State General Funds: Yes

Amount: \$185,395

% of Budget: 17%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees: USDA

\$ Grants:

Clients Served:

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: USDA, Food and Nutrition Services

Regulation Citation: 7 CFR 273.7 (7) (e)

13. Evidence-based Performance Assessment Process in Place by Program: Yes Describe:
E&T Coordinator places a participant in an E&T component with the individual at the time of initial assessment. The Coordinator tracks, monitors and reports progress of individuals and the program quarterly.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Jodie Gibson

Contact #: 471-1069

1. Program Name, Mission, Description, History:
Nebraska Homeless Assistance Program

The Homeless Shelter Assistance Trust Fund (HSATF) is authorized by Neb. Rev. Stat., sections 68-1601 through 68-1608. The HSATF is funded by 25 cents of the real estate transfer tax per \$1,000 of real estate value sold, per Neb. Rev. Stat., section 76-903.

The Emergency Solutions Grants Program (ESG) is authorized by the Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11371-11378). The program authorizes the Secretary of Housing and Urban Development to make grants to states, units of general local government, territories, and Indian tribes. On May 20, 2009, President Obama signed the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act with substantial changes, including a consolidation of HUD's competitive grant programs; creation of a Rural Housing Stability Assistance Program; a change in HUD's definition of homelessness and chronic homelessness; a simplified match requirement; an increase in prevention resources; and an increase in emphasis on performance.

Nebraska Homeless Assistance Program grants, which are composed of a combination of HSATF and ESG funds, are awarded annually to over 40 agencies and organizations statewide that provide homeless assistance and prevention services.

2. Program Manager and Phone Number:

Jodie Gibson 471-1069

3. # of State Employees:

One

4. # of Clients Served by Program:

SFY 2014: Approximately 10,000 individuals experiencing homelessness or at risk of homelessness.

5. Total Budget Amount: \$3,276,000

6. Federal Funds: Yes
Amount: \$526,000
% of Budget: 16%
7. State General Funds: No
Amount:
% of Budget:
8. State Cash Funds: Yes
Amount: \$2,750,000
% of Budget: 84%
9. Specified Tax Source: Yes
Name: The Homeless Shelter Assistance Trust Fund (HSATF) is funded by a twenty-five cent set-aside of the value of real estate sold in Nebraska and collected via the documentary tax stamp on real estate sales.
\$ Amount: For SFY2014, \$1,856,280 in HSATF funding was awarded to sub-grant organizations.
10. Contract with Private Providers: Yes
Providers: 1 contract
\$ Contracted: \$45,025
Clients Served: The contract provides technical support for the community-based homeless service agencies that comprise the Nebraska Balance of State Continuum of Care and assists them to successfully apply for Continuum of Care (CoC) funding from the U.S. Department of Housing and Urban Development and meet the associated federal requirements, including the development of program standards, performance measures and a centralized, coordinated assessment process. CoC funding provides for transitional and permanent supportive housing and services for homeless individuals in rural Nebraska.
11. Grant Awarded by Program Yes
Grantees: 46 sub-grants
\$ Grants: \$2,547,935
Clients Served: SFY 2013: Approximately 13,000 individuals experiencing homelessness or at risk of homelessness.
12. Mandated Services
State: Yes
Statute Citation:
NE Rev. Stat. 68-1601 – 68-1608; funded by NE Rev. Stat. 76-903
- Federal: Yes
Oversight Agency: U.S. Department of Housing and Urban Development
Regulation Citation: Subtitle B of title IV McKinney-Vento Homeless Asst. Act (42 U.S.C. 11371-11378).

13. Evidence-based Performance Assessment Process in Place by Program: Yes
Describe: The funded sub-grant programs of the Nebraska Homeless Assistance Program provide evidence based programming per the Federal Homeless Management Information System (HMIS) data requirements of the U.S. Department of Housing and Urban Development (HUD).

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Deanna Brakhage

Contact #: (402) 471-9331

1. Program Name, Mission, Description, History:
IV-E Adoption Assistance

Federal adoption assistance (Title IV-E) subsidy is funded by federal funds with state match. All federal subsidies must include: 1. Medicaid coverage (that is, the child is eligible for Medicaid within the resident state's guidelines, regulations and rates); and 2. Title XX services for which the family is eligible. Federal subsidy may also include a monthly payment to adoptive parents to assist in meeting the child's day-to-day needs. It is not intended to finance long-term plans, such as college. This monthly maintenance payment must be no more than the maintenance payment if the child had remained a ward.

2. Program Manager and Phone Number:
Deanna Brakhage 471-9331
3. # of State Employees:
This funding source does not pay for employee salaries.
4. # of Clients Served by Program:
SFY14 Unduplicated 3,804 (NFOCUS)
5. Total Budget Amount: \$17,437,106
6. Federal Funds: Yes
Amount: \$10,581,779
% of Budget: 60.7%
7. State General Funds: Yes
Amount: \$6,855,327
% of Budget: 39.3%
8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NE Revised Statutes 43-117 through 43-118.01

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: Title IV-E of the Social Security Act

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Jodi Allen

Contact #: 471--6288

1. Program Name, Mission, Description, History:

Title IV-E Foster Care

A federal funding source that is matched with state funds for the costs of foster care maintenance for eligible children, certain administrative costs to manage the foster care program, and training for specific groups of persons, such as foster parents, DHHS staff, private agency staff, and other externals involved with the foster care system, such as Court Appointed Special Advocates.

2. Program Manager and Phone Number:

Jodi Allen 471-6288

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

SFY14 Unduplicated 2,517 (NFOCUS)

5. Total Budget Amount: \$11,692,669

6. Federal Funds: Yes

Amount: \$7,283,917

% of Budget: 62.3%

7. State General Funds: Yes

Amount: \$4,196,585

% of Budget: 35.9%

8. State Cash Funds: Yes

Amount: \$212,167

% of Budget: 2.0%

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes
Providers: Contracts with 23 Child Placing Agencies and
The University of Nebraska Center for Children Families and the Law (training)
\$ Contracted:
Clients Served:
11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:
12. Mandated Services
State: Yes No
Statute Citation:

Federal: Yes No
Oversight Agency: Administration for Children and Families
Regulation Citation: Title IV-E of the Social Security Act
13. Evidence-based Performance Assessment Process in Place by Program: No
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Manuel Escamilla

Contact #: 402-471-9333

1. Program Name, Mission, Description, History:

Title IV-E Guardianship – This program is designed to ensure that financial barriers or costs associated with a child's needs do not prevent the permanency option of guardianship for the child. The Kinship Guardianship Assistance program (GAP) provides continued financial assistance for a child after a relative has been appointed legal guardian, and DHHS custody has been terminated.

2. Program Manager and Phone Number:

Manuel Escamilla 402-471-9333

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program: SFY14 Unduplicated 114 (NFOCUS)

5. Total Budget Amount: \$26,500

6. Federal Funds: Yes

Amount: \$15,000

% of Budget: 56.6%

7. State General Funds: Yes

Amount: \$11,500

% of Budget: 43.4%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NE Revised Statute § 71-1904

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: § 473 of the Social Security Act

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Office of Juvenile Services
Fiscal Year 2013-2014

Date: 09/10/14

Prepared by: Peggy Barner

Contact #: 471-8402

1. Program Name, Mission, Description, History:
Juvenile Accountability Block Grant (JABG)

Grant awarded by the U.S. Department of Justice (CFDA Title Juvenile Accountability Block Grant #16.523, Award #09-JA-605) through the NE Crime Commission for the purpose of developing/implementing juvenile accountability programs in partnership with DHHS-OJS and State Probation Administration. Funding has been received since 1999. The youth served are committed to DHHS-OJS and under the supervision of State Probation. Grant is managed by DHHS-OJS. JABG Grant #09-JA-605 provided funds from 01/01/11 to 10/31/12 for four School Intervention Programs located in Fremont, Grand Island, Lexington, and North Platte. The programs are funded with 90% federal funds and a 10% state match. Federal funding for JABG Grant #09-JA-605 ended on 10/31/12 and all programs were terminated.

2. Program Manager and Phone Number:
Peggy Barner 471-8402

3. # of State Employees: N/A

4. # of Clients Served by Program:
267 unduplicated youth were served in 4 program sites from 01/01/11 to 10/31/12. Federal funding for this program ended on 10/31/12.

5. Total Budget Amount: Total budget included in Program 345

6. Federal Funds: Yes
Amount:
% of Budget:

7. State General Funds: Yes
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: Yes
Providers: 4
\$ Contracted: \$181,101.00
Clients Served: 267 unduplicated youth served from 01/01/11 to 10/31/12

11. Grant Awarded by Program: No
Grantees:
\$ Grants:
Clients Served:

12. Mandated Services
State: No
Statute Citation:

Federal: No
Oversight Agency:
Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: Yes
Describe: Evidence-based program curriculum and evidence-based promise and practices are utilized in the programs.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014**

Date: September 10, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:

The Nebraska Low Income Heating and Energy Assistance Program (LIHEAP)

The purpose of the Nebraska Low Income Heating and Energy Assistance Program is to provide assistance to low-income households to offset the rising costs of home energy (heating and cooling). The highest level of assistance must be furnished to those households which have the lowest incomes taking into account family size. The program is funded on an annual basis with federal funding as authorized by the Low Income Energy Assistance Act of 1981.

2. Program Manager and Phone Number:

Karma Stockwell 402 471-9291

3. # of State Employees:

Field staff salaries through cost allocation and one program specialist.

4. # of Clients Served by Program: # of households in FY 2013 – 37,605

5. Total Budget Amount: \$29,623,498

6. Federal Funds: Yes
Amount: \$29,623,498
% of Budget: 100%

7. State General Funds: No
Amount:
% of Budget:

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: No
Providers:
\$ Contracted:

Clients Served:

11. Grant Awarded by Program Yes

2 Grantees: Nebraska Energy Office (NEO) and the United Tribes of Kansas and Southeast Nebraska (Tribes).

2 Grants: FY 2014 Tribes - \$18,000

FY 2014 NEO - \$3,304,003

Clients Served:

Tribes – don't receive this information

FY 2013 NEO - 303

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: Administration for Children and Families – Office of Community Services

Regulation Citation: Title III of the Human Resources Amendments of 1994 (Public Law 103-252); section 110 (p) of the PRWORA of 1996 (Public Law 104-193)

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014**

Date: September 15, 2014
Prepared by: Staci Zuerlein
Contact #: 471-7306

1. Program name, mission, description, history

MHCP – Medically Handicapped Children’s Program
GHP – Genetically Handicapped Persons’ Program
DCP –Disabled Children’s Program

Mission:

The Medically Handicapped Children’s Program provides diagnostic and consultative services through the offices of participating specialists, hospitals, or statewide clinic systems. Medical eligibility and financial eligibility (185% of the Federal Poverty Level) are determined at the time of referral. The most common diagnoses covered are Cerebral Palsy, Craniofacial Disorders, Cystic Fibrosis, Diabetes, Eye Disorders, Heart Conditions, Midline Neurological Defects, Neurological and Neuromuscular Disorders, Orthopedic Disorders, Asthma, and Hearing Loss Defects. Ages served are birth through age 20.

Individuals with a diagnosis of Cystic Fibrosis, Hemophilia, or Sickle Cell could transition from the Medically Handicapped Children’s Program to the Genetically Handicapped Program at age 21. Services provided include similar services provided in the Medically Handicapped Children’s Program.

The Disabled Children’s Program provides support services to eligible individuals age 15 or younger who receive Supplemental Security Income payments. Funding is available for respite care, sibling care, medical mileage reimbursement, and special equipment and home modifications. Services are determined based on the needs of the families’ enrolled.

History:

The Medically Handicapped Children’s Program and Disabled Children’s Program receive Title V funding, including some state match creating a solid federal-state partnership. Since 1935, the federal government has pledged its support of Title V of the Social Security Act, making it the oldest, continuously funded public health legislation in U.S. history.

2. Program Coordinator: Staci Zuerlein, 471-7306

3. # of State Employees: 6.5 FTE Social Services Workers across Nebraska, 1 FTE Claims Reviewer, 1 FTE Program Coordinator
4. # of clients served by program: 2200 persons served throughout the 2014 grant year.
5. Total Budget Amount: \$2,455,955 total funds FY 2014
6. Federal Funds **X yes** ___ no
\$1,039,685 federal funds
7. State General Funds **X yes** ___ no
\$1,416,270 general fund
8. State Cash Funds ___ yes **X no**
9. Specified Tax Source ___ yes **X no**
10. Contract with private providers for services **X yes** ___ no
MHCP contracts ending June 30, 2014 totaled \$903,571.
11. Grant awarded by program ___ yes **X no**
12. Mandated services
State: **X yes** ___ no
Statute citation: Nebraska Revised Statutes Sections 43-507; 43-522; 68-309; 68-717; 68-1403-1408
Federal **X yes** no Fed P.L. 97-35 Sub D Sect (501)(a)(4), Title V Maternal and Child Health Block Grant
Oversight agency: Federal Department of Health and Human Services
Regulation citation: NAC Title 467
13. Evidence-based performance assessment process in place by program
___ yes **X no**

Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Office of Juvenile Services
Fiscal Year 2013-2014

Date: 09/10/14

Prepared by: Tony Green

Contact #: 471-8403

1. Program Name, Mission, Description, History:
OJS Administration – Program 315

This program provides salaries and benefits for DHHS-OJS central office personnel, which consists of the Deputy Director and two Program Specialists. Program 315 also supports the operating costs that include Interstate Compact for Juveniles membership dues, Council of Juvenile Correctional Administrators Performance Based Standards fee, Youth Level of Service/Case Management Inventory (YLS/CMI) license and assessment costs for juvenile risk assessment tool, YLS/CMI training and certification, legal services for juvenile parolees for Parole Revocation Hearings and juveniles committed to a YRTC who are interviewed by law enforcement as a suspect in a criminal law violation, training, and travel expenses for central office personnel.

2. Program Manager and Phone Number:
Tony Green, 471-8403

3. # of State Employees:
This funding source pays for three (3) full-time positions.

4. # of Clients Served by Program: Ninety-nine (99) juveniles were provided legal services through this funding source.

5. Total Budget Amount: \$378,184

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$378,184
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 3

\$ Contracted: \$14,919.00

Clients Served: 61

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Ne Rev. Stat. 43-401 to 43-423

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: N/A

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Office of Juvenile Services
Fiscal Year 2013-2014

Date: 09/10/14

Prepared by: Tony Green

Contact #: 471-8403

1. Program Name, Mission, Description, History:

Parole – Program 364

This program provides for the salaries and benefits of a limited number of Juvenile Services Officers who provide supervision exclusively to juvenile delinquents committed to OJS in each of the five (5) Service Areas. This funding source is also used for the purchasing of restraint equipment and urinalysis testing supplies for the five (5) Service Areas.

This program was eliminated in FY13/14 as a result of Legislative Bill LB561. A small amount of money was left in this program to capture any carry-over expenses from SFY13.

2. Program Manager and Phone Number:

Tony Green, 471-8403

3. # of State Employees: This funding source pays for approximately four (4) full-time positions.

4. # of Clients Served by Program: N/A

5. Total Budget Amount: \$5,366.79

6. Federal Funds: No

Amount:

% of Budget:

7. State General Funds: Yes

Amount: \$5,366.79

% of Budget: 100%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: The purchasing of restraint equipment and urinalysis testing supplies is completed thru the state agency-wide contracts maintained by the Nebraska Department of Administrative Services.

Providers: 2

\$ Contracted: Amount unknown due to state agency-wide contracts are maintained by DAS.

Clients Served: N/A

11. Grant Awarded by Program: No

Grantees:

\$Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Ne Rev. Stat. 43-401 to 43-423

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: NA

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Jodi Allen

Contact #: 471-6288

1. Program Name, Mission, Description, History:
Post Adoption / Guardianship Program

Beginning January 1, 2010, a contractor, Lutheran Family Services & Affiliates, implemented after care services which has become known as Right Turn. Right Turn provides post adoption and post guardianship case management and services. These services are requested by the adoptive parents or guardian to help stabilize the family and prevent dissolution of the adoption or guardianship. Monitoring of service quality and outcomes will be done by DCFS staff.

2. Program Manager and Phone Number:
Jodi Allen, 471-6288

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY 2013 Right Turn served 232 families, including 580 children.

5. Total Budget Amount: \$2,027,970

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$2,027,970
% of Budget: 100.0%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 1

\$ Contracted:

Clients Served: SFY 2013 Right Turn served 232 families, including 580 children

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Statute 71-824

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe

Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: 09/09/14

Prepared by: Tony Green

Contact #: 402-471-8403

1. Program Name, Mission, Description, History:
Pre-Disposition Detention

Funding for juveniles who are non-wards, to stay in detention following 10 days from when a pre-dispositional evaluation is ordered by the court until the time the evaluation begins.

2. Program Manager and Phone Number:
Mike Reddish, 402-471-9700

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program: 75

5. Total Budget Amount: \$156,536

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$156,536
% of Budget: 100.0%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No
Name:
\$ Amount:

10. Contract with Private Providers: Yes

Providers: 5

\$ Contracted: \$126,196

Clients Served: 75

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services: No

State:

Statute Citation:

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: N/A

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: 09/11/2014

Prepared by: Emily Kluver

Contact #: 471-8424

1. Program Name, Mission, Description, History:

Nebraska Child Abuse Prevention Fund Board

The Nebraska Child Abuse Prevention Fund Board was created in 1986 by the State Legislature and is dedicated to the following objectives:

- Directing grant funds to support research-based primary prevention through community collaborations.
- Supporting a statewide network of local child abuse prevention councils that conduct public awareness and education activities for parents, professionals, and communities.
- Providing training and technical assistance best practices for prevention to community grantees, local child abuse prevention councils, and other audiences.

2. Program Manager and Phone Number:

Emily Kluver 471-8424

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

SFY 2012-2013:

- direct services to 185 families and 208 children
- statewide public awareness activities

5. Total Budget Amount: \$250,000

6. Federal Funds: No

Amount:

% of Budget:

7. State General Funds: No

Amount:

% of Budget:

8. State Cash Funds: Yes
Amount: \$250,000
% of Budget: 100.0%
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: No
Providers:
\$ Contracted:
Clients Served:
11. Grant Awarded by Program Yes
Grantees: 7
\$ Grants: \$250,000
Clients Served: SFY 2012-2013:
 - direct services to 185 families and 208 children
 - statewide public awareness activities
12. Mandated Services
State: Yes
Statute Citation: Neb. Rev. Statutes 43-1902, 1903 & 1904

Federal: No
Oversight Agency:
Regulation Citation:
13. Evidence-based Performance Assessment Process in Place by Program: No
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 10, 2014

Prepared by: Connie Pfeifer

Contact #: 402-471-9245

1. Program Name, Mission, Description, History:

Protection and Safety

Subprogram 025 – Protection & Safety (Old Program 18)

This funding is used to fund child abuse/neglect public awareness activities, training on child abuse/neglect for medical staff, law-enforcement, and other community professionals and supports services provided by Child Advocacy Centers (CAC).

Child Advocacy Centers serve all 93 Nebraska counties. The Centers bring together professionals under one roof, to work as a team and focus on the specific needs of each child victim of abuse or neglect. Services include: forensic interviews, medical evaluations, case coordination, child advocacy and mental health support services.

2. Program Manager and Phone Number:

Connie Pfeifer, 402-471-9245

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

Child Advocacy Centers In calendar year 2013, the Child Advocacy Centers across Nebraska provided 3,716 forensic interviews, 1,359 medical exams, advocacy support services for 10,278 children, coordinated 11,525 multi-disciplinary team case reviews, and hair tested 697 children for drug exposure in their homes.

5. Total Budget Amount: \$1,789,556

6. Federal Funds: No

Amount:

% of Budget:

7. State General Funds: Yes

Amount: \$1,789,556

% of Budget: 100.0%

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

11. Grant Awarded by Program Yes

Grantees: Total 8: 7 Child Advocacy Centers: Bridge of Hope in North Platte; CAPstone in Scottsbluff, Central Nebraska Child Advocacy Center in Grand Island, Family Advocacy Network in Kearney, Lincoln Child Advocacy Center in Lincoln, Project Harmony in Omaha, and Northeast Nebraska Child Advocacy Center in Norfolk.

1 Nebraska Alliance of Child Advocacy Centers

\$ Grants: \$ This is different from the earlier numbers. Not certain if they are asking for CJA and CAPTA monies here or not.

Clients Served: In calendar year 2013, the Child Advocacy Centers across Nebraska provided 3,716 forensic interviews, 1,359 medical exams, advocacy support services for 10,278 children, coordinated 11,525 multi-disciplinary team case reviews, and hair tested 697 children for drug exposure in their homes.

12. Mandated Services

State: Yes

Statute Citation: Child Advocacy Centers - Neb. Rev. Statute 28-728

Federal: Yes

Oversight Agency: Administration for Children and Families

Regulation Citation: Child Advocacy Centers- Public Law 108-36

13. Evidence-based Performance Assessment Process in Place by Program: Yes

Describe: Child Advocacy Center protocols follows the best and promising practice guidelines of the National Association of Child Advocacy Centers.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: 9/10/2014

Prepared by: Karen Parde

Contact #: 402-471-9264

1. Program Name, Mission, Description, History:
Refugee Resettlement

The Refugee Act of 1980 was created to provide for effective resettlement of refugees and to assist them to achieve self-sufficiency. The purpose of the Refugee Resettlement Program (RRP) is to provide assistance to refugees who are not eligible for ADC or Medicaid, to achieve economic self-sufficiency as quickly as possible and to assist with refugees' financial and medical assistance during their initial resettlement into the United States. RRP services are only available for the first 8 months from the date of arrival into this country. Health Screening Services and vaccinations are provided to newly arrived refugees. DHHS funds community agencies statewide to provide assistance with housing and food, application assistance, job readiness training and employment search, ESL classes, and supportive services, health screening services and vaccinations, services to school age refugee children.

2. Program Manager and Phone Number:
Karen Parde 402-471-9264

3. # of State Employees:
1.5 FTE

4. # of Clients Served by Program:

- Refugee Cash assistance – average of 245 people each month.
- Refugee Medical assistance – average of 308 people each month.
 - Refugee Health Screening – average 85 per month.

5. Total Budget Amount: \$3,438,216

The below is the federal award amount based on FFY 2014, unless otherwise noted:

- a. Refugee Cash and Medical Assistance – \$1,783,687.25 Feds reimburse for actual costs.
This total is for cash spent from 10/1/13 – 8/31/14
- b. Preventive Health – \$97,252 (8/15/13 – 8/14/14)
- c. Social Services – \$767,106 (10/1/13 – 9/30/14)
- d. TAG-F – \$347,571 (10/1/13 – 9/30/14)
- e. TAG-D – \$150,000 (10/1/13 – 9/30/14)
- f. School Impact – \$194,400 (8/15/13 – 8/14/14)
- g. Older Refugee -- \$97,200 (10/1/13 – 9/30/14)

6. Federal Funds: Yes
Amount: \$3,437,216
% of Budget: 100%
7. State General Funds: No
Amount:
% of Budget:
8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: Yes
Providers: 3 contractors
\$ Contracted: \$1,042,000
Clients Served: 1,100 (new program – this is an estimate of what will be served)
11. Grant Awarded by Program Yes
Grantees: \$ Grants# Clients Served: 501
- Refugee Preventive Health – (10/1/13 – 9/30/14)
 - 1 Subgrant
 - \$97,252
 - Numbers indicate total people attending training. – more than 2,000 received education; 600 received reminder letters
 - Refugee Social Services – (10/1/12- 9/30/13)
 - 6 Subgrants
 - \$767,106
 - Numbers indicate # of services provided – more than 3,500 services provided.
 - TAG-Formula (10/1/12 – 9/30/13)
 - 2 Subgrants
 - \$347,571
 - More than 1,500 services provided
 - TAG-Discretionary (10/1/12- 9/30/13)
 - 5 subgrants
 - \$150,000
 - More than 1,200 services provided.

12. Mandated Services

State: No

Statute Citation:

Federal: Yes

Oversight Agency: Office of Refugee Resettlement

Regulation Citation: Refugee Act of 1980, Public Law 96-212 and Refugee Amendments of 1982, Public Law 97-363

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014**

Date: September 15, 2014
Prepared by: Sharon Johnson
Contact #: 471-1764

1. Program name, mission, description, history

Respite – Network

Mission:

Respite is a service that is designed to give caregivers a break from the demands of providing ongoing care for another individual. Network provides information and referral, provider and caregiver training, and resource development for respite services.

History:

State legislation enacted in 1999 authorized establishment of a statewide lifespan respite network.

2. Program manager, phone number: Sharon Johnson, 471-1764
3. # of State Employees: .5 FTE in Central Office
4. # Clients served: The Lifespan Respite Network (LRN) had 18,528 calls, emails or NRRS/Respite Search requests for information or assistance. All contacts by telephone, personal contacts, USPS mailings, social and print media, presentations, email communications with providers and caregivers totaled 496,543 contacts.
5. Total Budget Amount: \$580,441 SFY 2014
6. Federal Funds **X** yes no
\$53,042.44 federal funds (NDE)
% of budget: 12.14%
7. State General Funds **X** yes no
\$122,756 general funds
% of budget: 100.02%
8. State Cash Funds **X** yes ___ no
\$404,643
% of budget: 88.94%

9. Specified Tax Source **X yes** ___ no
Name: Fund 22640 Health Care Cash Fund
\$404,643
10. Contract with private providers for services ___ yes **X no**
Providers
\$ contracted
Clients served
11. Grant awarded by program **X yes** ___ no
Grantees 6
\$ Grants \$464,640
Clients served: The Lifespan Respite Network (LRN) had 18,528 calls, emails or NRRS/Respite Search requests for information or assistance. All contacts by telephone, personal contacts, USPS mailings, social and print media, presentations, email communications with providers and caregivers totaled 496,543 contacts.
12. Mandated services
State: **X yes** ___ no
Statute citation: Nebraska Revised Statute Sections 68-1520 to 68-1528
Federal **X yes** no Lifespan Respite Care Act of 2006 (P.L. 109-716)
Oversight agency: Nebraska DHHS
Regulation citation: NA
13. Evidence-based performance assessment process in place by program
___ yes **X no**
Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014**

Date: September 15, 2014
Prepared by: Sharon Johnson
Contact #: 471-1764

1. Program name, mission, description, history

Respite – Subsidy

Mission:

Respite is a service that is designed to give caregivers a break from the demands of providing ongoing care for another individual. Persons eligible are caregivers providing continuous, ongoing care with demonstrated need for respite and income below 312% Federal Poverty Level.

History:

State legislation enacted in 1999 authorized development of a state-wide lifespan respite program.

2. Program manager, phone number: Sharon Johnson, 471-1764
3. # of State Employees: 1.75 FTE at Central Office
4. # of clients served by program: 839 persons served in SFY 2013
5. Total Budget Amount: \$810,000 SFY 2014
6. Federal Funds yes no
\$
% of budget
7. State General Funds yes no
\$
% of budget
8. State Cash Funds yes no
\$446,885 expended in cash funds for SFY 2014
% of budget: 100%

9. Specified Tax Source **X yes** ___ no
Name: Fund 22640 Health Care Cash Fund
\$ Amount: \$810,000 allocation SFY 2014
10. Contract with private providers for services ___ yes **X no**
Providers
\$ contracted
Clients served
11. Grant awarded by program ___ yes **X no**
Grantees
\$ Grants
Clients served:
12. Mandated services
State: **X yes** ___ no
Statute citation: Nebraska State Statute Sections 68-1520 through 68-1528
Federal yes **X no**
Oversight agency: NE DHHS
Regulation citation: NAC Title 464
13. Evidence-based performance assessment process in place by program
___ yes **X no**

Describe: Client directed system with client choosing provider and determining satisfaction with services provided.
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014**

Date: September 11, 2014

Prepared by: Deanna Brakhage

Contact #: (402) 471-9331

1. Program Name, Mission, Description, History:

Support Systems for Rural Homeless Youth: A Collaborative State and Local Demonstration Project

This funding is for collaborating with local community-based organizations in order to influence policies, programs, and practices that affect the design and delivery of services to runaway and homeless youth, ages 16-21, in Transitional Living Programs (TLP), as well as youth aging out of State child welfare systems and into Independent Living Programs. This is a five year grant.

2. Program Manager and Phone Number:

Deanna Brakhage 471-9331

3. # of State Employees:

This funding source does not pay for employee salaries.

4. # of Clients Served by Program:

| Services Provided | Number of Youth Served 4/1/2012 – 9/30/2012 | Number of Youth Served 10/1/2012 – 3/31/2013 | Number of Youth Served 4/1/2013 - 10/30/2013 |
|--|---|--|--|
| Case Management Support | 16 | 36 | 33 |
| Brief Contacts | 387 | 308 | 292 |
| Physical Health Screening | 3 | 6 | 11 |
| Mental Health Counseling Referrals | 3 | 3 | 19 |
| Peer Navigator Program | 5 | - | - |
| Housing* | 49 | 10 | 14 |
| Rent Wise Training | 1 | 4 | - |
| Independent Living Services ^o | 29 | 40 | 40 |
| Employment Boot Camp | 12 | 40 | - |
| Employment Skills Class | - | - | 15 |
| Employed | 3 | 41 | 14 |
| Education Assistance | 8 | 4 | 14 |
| Youth Leadership Workshop | 32 | - | - |
| Youth Leadership Camp | 22 | - | 22 |

5. Total Budget Amount: Total budget included in Program 354
6. Federal Funds: Yes
Amount:
% of Budget:
7. State General Funds: No
Amount:
% of Budget:
8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: Yes
Providers: 1
\$ Contracted: \$200,000
Clients Served:
11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:
12. Mandated Services
State: No
Statute Citation:

Federal: Yes
Oversight Agency: Administration for Children and Families
Regulation Citation: Section 343 of the Runaway and Homeless Youth Act (42 USC 5714-23) as amended by the Reconnecting Homeless Youth Act of 2008 (P.L. 110-378)
13. Evidence-based Performance Assessment Process in Place by Program: No
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program Name, Mission, Description, History:

Supplemental Nutrition Assistance Program (SNAP) formerly Food Stamp Program

SNAP assists low-income households purchase foods, such as fruits, vegetables and whole grains, needed for good health. The Federal Food and Nutrition Service (FNS) reaches out to eligible low-income families who are not currently participating in SNAP through State and local agencies, advocates, employers, community and faith-based organizations, and others by providing information about the nutrition benefits of SNAP. This information assists households in making informed participation decisions and nutritional food choices.

2. Program Manager and Phone Number:

Samantha Pfister, 402-471-2738

3. # of State Employees:

Field staff salaries through cost allocation and four program specialists and one program manager.

4. # of Clients Served by Program:

SFY14 Average Monthly Households 78,051

5. Total Budget Amount: \$248,035,420

6. Federal Funds: Yes

Amount: \$248,035,420

% of Budget: 100%

7. State General Funds: No

Amount:

% of Budget:

8. State Cash Funds: No

Amount:

% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 1

\$ Contracted: SNAP EBT – Average Paid to Contractor Monthly - \$78,832

Clients Served: SNAP EBT – Households 78,051/month

11. Grant Awarded by Program: no.

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State:

Federal:

Oversight Agency: US Department of Agriculture, Food and Nutrition Services

Regulation Citation: 7 CFR Sections 271-295, Food Stamp Act of 1977, Food and Nutrition Act of 2008

13. Evidence-based Performance Assessment Process in Place by Program: Yes Describe:
State and Federal; Quality Control, Management Evaluation and Operations Reviews.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 15, 2014

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program name, mission, description, history

SSBG –Social Services Block Grant for the Aged and Disabled

Mission:

Social Services Block Grant (SSBG) funds are to enable each State to furnish social services best suited to meet the needs of the individuals residing within the State. Such services may be, but are not limited to: daycare for children or adults, protective services for children or adults, special services to persons with disabilities, adoption, case management, health-related services, transportation, foster care for children or adults, substance abuse, housing, home-delivered meals, independent/transitional living, employment services or any other social services found necessary by the State for its population. Persons served by the SSBG – A&D are elderly individuals age 60 and over and adults with disabilities between the ages of 19 and 59 who have an assessed need for service and generally low income. Current SSI and/or State Supplemental recipients are eligible, as well as individuals with monthly income below \$1,104 or families below \$1,239. APS clients may be served without regard to income for a limited period of time.

History:

Title XX of the Social Security Act was created in 1975 (Public Law 93-647); OBRA 1981 (Public Law 97-35) amended title XX to establish a "block grant to States for social services.

2. Program manager, phone number: Sally Hinds, 471-9020
3. # of State Employees: .5 FTE Central Office; Social Service Workers employed by CFS Division across the state allocate varied fractions of their time to this program.
4. # of clients served by program: 21,208 persons served in SFY 2013.
5. Total Budget Amount: \$15,953,619 total funds expended in SFY 2014
6. Federal Funds **X** yes ___ no
\$9,272,989 federal funds
% of budget: 58%

7. State General Funds **X yes** ___ no
\$6,680,630 general funds
% of budget: 42%
8. State Cash Funds ___ yes **X no**
\$
% of budget
9. Specified Tax Source ___ yes **X no**
Name
\$ Amount
10. Contract with private providers for services yes x no
Providers
\$ contracted
Clients served
11. Grant awarded by program ___ yes **X no**
Grantees
\$ Grants
Clients served:
12. Mandated services
State: **X yes** ___ no
Statute citation: Nebraska State Statute Sections 68-1202; 68-703; 68-1204
Federal: **X yes** ___ no Social Security Act – Title XX
Oversight agency: Federal DHHS
Regulation citation: NAC Title 473
13. Evidence-based performance assessment process in place by program
Yes **X no**

Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:
State Disabled-Medical

The Nebraska State Disability Program was established by the Nebraska Legislature in 1976 by Neb. Rev. Stat. 68-1005. The intent of the program is to provide medical assistance to persons who are age 64 and younger and who are disabled or blind in accordance with program standards.

This funding is State only dollars to cover Medical expenses which would be covered under Medicaid if the individual qualified under the guidelines for Assistance to the Aged, Blind, and Disabled (AABD). Individuals with disabilities qualifying for State Disability Medical are those who have been determined to be disabled by the State (CFS contracted medical doctor) rather than the Social Security Administration (SSA) only when SSA has determined the individual's disability does not meet duration requirements for SSA. They receive medical assistance funded solely from State GF. Eligibility is for twelve months.

2. Program Manager and Phone Number:
Karma Stockwell 402-471-9291

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program: SFY14 monthly average 84

5. Total Budget Amount: \$9,097,211

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$9,097,211
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:
9. Specified Tax Source: No
Name:
\$ Amount:
10. Contract with Private Providers: No
Providers:
\$ Contracted:
Clients Served:
11. Grant Awarded by Program No
Grantees:
\$ Grants:
Clients Served:
12. Mandated Services
State: Yes
Statute Citation: 68-1001, 68-1002 and 68-1005

Federal: No
Oversight Agency:
Regulation Citation:
13. Evidence-based Performance Assessment Process in Place by Program: No
Describe:
14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 471-2738

1. Program Name, Mission, Description, History:
State Disabled-Maintenance

The funding is solely State dollars for maintenance payments to eligible individuals. Individuals with disabilities qualifying for State Disability Maintenance are those who have been determined to be disabled by the State (CFS contracted medical doctor) rather than the Social Security Administration (SSA) only when SSA has determined the individual's disability does not meet duration requirements for SSA. Eligibility continues only as long as the State finds the individual to be disabled, up to 12 months. The maintenance payment amount is based on standard of need. The standard of need is a consolidation of items necessary for basic subsistence with amounts based on unit size.

2. Program Manager and Phone Number:
Karma Stockwell 402-471-9291

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 monthly average 32

5. Total Budget Amount: \$466,684

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$466,684
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: NRS 68-1001, 68-1002 and 68-1005

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014**

Date: September 11, 2014

Prepared by: Teri Chasten

Contact #: 402-471-2738

1. Program Name, Mission, Description, History:
State Supplement Aid to the Aged, Blind, and Disabled (AABD)

The AABD Program for the state grant supplement was established to provide financial aid to persons in need who are age 65 and older, or who are age 64 and younger and blind or disabled according to the Retirement, Survivors, and Disabled Insurance (RSDI) / Supplemental Security Income (SSI) Program definition of blindness or disability. This maintenance portion of the AABD is funded entirely by state money.

2. Program Manager and Phone Number:
Karma Stockwell 402-471-9291

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 average monthly 5,830

5. Total Budget Amount: \$8,522,485

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$8,522,485
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Stat. 68-1001, 68-1002, 68-1006, 68-1007

Federal: No

Oversight Agency: Social Security Administration

Regulation Citation: Title XIX of the Social Security Act (mandates state maintenance of effort).

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Child Welfare
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Deanna Brakhage

Contact #: (402) 471-9331

1. Program Name, Mission, Description, History:
Subsidized Adoption

This program pays for certain costs in a special needs adoption through all state funds. These costs may include childcare, maintenance care to assist with meeting the child's day-to-day needs, respite care, assistive technology to renovate homes and vehicles, etc. Children in this program also receive Nebraska Medicaid, which is a federally-funded program with state match. Payments are made directly to or on behalf of the adoptive parents.

2. Program Manager and Phone Number:
Deanna Brakhage 471-9331

3. # of State Employees:
This funding source does not pay for employee salaries.

4. # of Clients Served by Program:
SFY14 Unduplicated 1,132 (NFOCUS)

5. Total Budget Amount: \$9,827,839

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$9,827,839
% of Budget: 100.0%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes Statute Citation: NE Revised Statutes 43-117 through 43-118.01

Federal: No

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Economic Assistance
Fiscal Year 2013-2014

Date: September 11, 2014

Prepared by: Teri Chasten
Contact #: 402-471-2738

1. Program Name, Mission, Description, History: **Tribal ADC**

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 is the federal welfare reform Act which established the Temporary Assistance for Needy Families (TANF) program. This Act also provides Tribes the opportunity to develop and operate their own Tribal TANF program for Native American families. The State of Nebraska, wishing to support this effort provides State Maintenance-of-Effort (MOE) funds pursuant to Nebraska Revised Statutes 68-1738 to the Tribes who have received federal approval to operate their own TANF programs.

DHHS has contracted with the Winnebago Tribe of Nebraska to provide State MOE funds since April 2001; and with the Santee Sioux Tribe of Nebraska since October 2011.

2. Program Manager and Phone Number: Betty Toelle, TANF Program Manager, (402) 471-6661.

3. # of State Employees: N/A

4. # of Clients Served by Program:
Thurston County: Average of 60 families per month
Dakota County: Average of 15 families per month
Knox County: Average of 36 families per month

5. Total Budget Amount: \$339,929

6. Federal Funds: No
Amount:
% of Budget:

7. State General Funds: Yes
Amount: \$339,929
% of Budget: 100%

8. State Cash Funds: No
Amount:
% of Budget:

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: No

Providers:

\$ Contracted:

Clients Served:

11. Grant Awarded by Program: Yes or No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

The Department of Health and Human Services shall make state funds available which are appropriated to meet the needs of people living on tribal lands or in tribal service areas as defined in section 43-1503 if the people residing on tribal lands or in tribal services areas choose to operate their own welfare reform programs.

Statute Citation: Nebraska Revised Statutes 68-1738.

Federal:

Oversight Agency: Administration for Children and Families, Office of Family Assistance (OFA)

Regulation Citation: Federal legislation: Section 409(a)(7) of the Social Security Act (Act), Section 412 of the Act, 45 CFR part 263, subpart A and 45 CFR part 286.

13. Evidence-based Performance Assessment Process in Place by Program: No

Describe:

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Office of Juvenile Services
Fiscal Year 2013-2014

Date: 09/10/14

Prepared by: Tony Green

Contact #: 471-8403

1. Program Name, Mission, Description, History:

Youth Rehabilitation and Treatment Center-Geneva - Program 371

This program supports the operation of the Youth Rehabilitation and Treatment Center in Geneva and provides for the supervision, care and treatment of female juvenile delinquents committed to the facility by the court or pursuant to a parole revocation. The mission of YRTC-Geneva is to provide a safe, secure, and nurturing environment in which the girls may learn, develop a sense of self, and return to the community as productive law-abiding citizens. The average daily census for SFY14 was 59 juveniles.

2. Program Manager and Phone Number:

Tony Green, 471-8403

3. # of State Employees: 101.85 FTE

4. # of Clients Served by Program: 89 female juveniles committed to YRTC-G

5. Total Budget Amount: \$7,736,606

6. Federal Funds: Yes

Amount: \$156,032

% of Budget: 2.0%

7. State General Funds: Yes

Amount: \$7,474,778

% of Budget: 96.6%

8. State Cash Funds: Yes

Amount: \$105,796

% of Budget: 1.4%

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 16

\$ Contracted: \$561,223.74

Clients Served: 89 female juveniles committed to YRTC-G

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Statutes 43-401 to 43-423

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: Yes

Describe: American Correctional Association (ACA) Accreditation Standards and Performance-based Standards Learning Institute for quality control of facility improvement.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Children and Family Services
Office of Juvenile Services
Fiscal Year 2013-2014

Date: 09/10/14

Prepared by: Tony Green

Contact #: 471-8403

1. Program Name, Mission, Description, History:

Youth Rehabilitation and Treatment Center-Kearney - Program 374

This program supports the operation of the Youth Rehabilitation and Treatment Center in Kearney and provides for the supervision, care and treatment of male juvenile delinquents committed to the facility by the court or pursuant to a parole revocation. The mission of YRTC-Kearney is to help juveniles live better lives through effective services and affording them the opportunity to become law-abiding citizens. The average daily census for SFY14 was 111 juveniles.

2. Program Manager and Phone Number:

Tony Green, 471-8403

3. # of State Employees: 170.1 FTE

4. # of Clients Served by Program: 203 male juveniles committed to YRTC-K

5. Total Budget Amount: \$12,242,814

6. Federal Funds: Yes

Amount: \$415,961

% of Budget: 3.4%

7. State General Funds: Yes

Amount: \$10,847,269

% of Budget: 88.6%

8. State Cash Funds: Yes

Amount: \$979,584

% of Budget: 8%

9. Specified Tax Source: No

Name:

\$ Amount:

10. Contract with Private Providers: Yes

Providers: 11

\$ Contracted: \$2,049,262.00

Clients Served: 203 male juveniles committed to YRTC-K

11. Grant Awarded by Program: No

Grantees:

\$ Grants:

Clients Served:

12. Mandated Services

State: Yes

Statute Citation: Neb. Rev. Statutes 43-401 to 43-423

Federal: No

Oversight Agency:

Regulation Citation:

13. Evidence-based Performance Assessment Process in Place by Program: Yes

Describe: American Correctional Association (ACA) Accreditation Standards and Performance-based Standards Learning Institute for quality control of facility improvement.

14. Additional Information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

9. Specified Tax Source yes no
 Name N/A
 \$ Amount N/A
10. Contract with private providers for services yes no
 # Providers 40
 \$ contracted \$ 126,124,688
 # Clients served 4,352 receiving specialized services from certified/contracted providers
11. Grant awarded by program yes no
 # Grantees N/A
 \$ Grants N/A
 # Clients served N/A
12. Mandated services
 State yes no
 Statute citation: 83-1201 to 83-1226
 Federal yes no
 Oversight agency: Centers for Medicaid and Medicare Services
 Regulation citation:
13. Evidence-based performance assessment process in place by program
 yes no
 Describe: We have a QA/QI system as required by our waivers.
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Developmental Disabilities
Fiscal Year 2013-2014**

Date September 10, 2014

Prepared by Tricia Mason

Contact # 402-471-8704

1. Program name, mission, description, history

Service Coordination - 267:

The Division provides service coordination services to all individuals who receive a service within the DD system and by request, to those who have been found eligible for DD services and might be waiting for a service. This includes general oversight of the provision of services (in addition to the certification/QA services provided by DD Administration) and direct program development and oversight services to individuals.

2. Program manager, phone number
Tricia Mason, Deputy Director, Community-Based Services 402-471-8704
3. # of State Employees 262
4. # of clients served by program 4,790 (As of June 30, 2014)
5. Total Budget Amount \$12,673,922
6. Federal Funds X yes ___no
 \$ 6,897,139
 % of budget 54%
7. State General Funds X yes ___no
 \$ 5,776,783
 % of budget 46%
8. State Cash Funds ___yes X no
 \$ N/A
 % of budget N/A
9. Specified Tax Source ___yes X no
 Name N/A
 \$ Amount N/A

10. Contract with private providers for services yes no
 # Providers N/A
 \$ contracted N/A
 # Clients served N/A
11. Grant awarded by program yes no
 # Grantees N/A
 \$ Grants N/A
 # Clients served N/A
12. Mandated services
 State yes no
 Statute citation: 83-1201 to 83-1226
 Federal yes * no
 Oversight agency: Centers for Medicaid and Medicare Services
 Regulation citation: *No but is required in order to provide Community Based Services
13. Evidence-based performance assessment process in place by program
 yes no
 Describe: We have a QA/QI system as required by our waivers.
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Developmental Disabilities
Fiscal Year 2013-2014**

Date September 10, 2014

Prepared by Tricia Mason

Contact # 402-471-8704

1. Program name, mission, description, history

DD Administration -269:

The Division provides statewide oversight of BSDC and Community-Based Services through its administrative offices. DD Administration manages the three HCBS waivers, provider certification, investigations and contracting, BSDC/Bridges oversight, and provides QA/technical assistance services for all DD programs.

2. Program manager, phone number
Jodi M. Fenner, Director Division of Developmental Disabilities 402-471-6038
3. # of State Employees 42
4. # of clients served by program N/A
5. Total Budget Amount \$ 2,676,146
6. Federal Funds X yes _____no
 \$ 1,209,308
 % of budget 44%
7. State General Funds X yes _____no
 \$ 1,466,838
 % of budget 55%
8. State Cash Funds _____yes X no
 \$ N/A
 % of budget N/A
9. Specified Tax Source _____yes X no
 Name N/A
 \$ Amount N/A

10. Contract with private providers for services _yes _no
 # Providers N/A
 \$ contracted N/A
 # Clients served N/A
11. Grant awarded by program _yes _no
 # Grantees N/A
 \$ Grants N/A
 # Clients served N/A
12. Mandated services
 State _yes _no
 Statute citation: 83-1201 to 83-1226
 Federal _yes _no
 Oversight agency: N/A
 Regulation citation: N/A
13. Evidence-based performance assessment process in place by program
_yes _no
 Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form
Division of Developmental Disabilities
Fiscal Year 2013-2014

Date September 9, 2014

Prepared by Delvin Koch

Contact # 402-223-6801

1. Program name, mission, description, history

Beatrice State Developmental Center (BSDC):

The Division administers Beatrice State Developmental Center (an ICF/MR), and the Bridges program (a Center for Developmental Disabilities). These programs are both contained within the BSDC appropriated budget and provide residential and habilitation services for individuals with developmental disabilities.

2. Program manager, phone number
Delvin Koch, CEO 402-223-6858
3. # of State Employees 588
4. # of clients served by program 130 Total: 124 BSDC & 6 Bridges
5. Total Budget Amount \$49,235,946
6. Federal Funds X yes no
\$21,341,526
% of budget 43
7. State General Funds X yes no
\$ 25,182,938
% of budget 51
8. State Cash Funds X yes no
\$2,711,482
% of budget 6
9. Specified Tax Source yes X no
Name _____
\$ Amount _____
10. Contract with private providers for services X yes no
Providers Varies
\$ contracted Varies
Clients served 130

11. Grant awarded by program _____yes X no

Grantees _____

\$ Grants _____

Clients served _____

12. Mandated services

State X yes _____no

Statute citation: 83-1201 through 83-1227

Federal _____yes X no

Oversight agency: Centers for Medicare and Medicaid

Regulation citation:

13. Evidence-based performance assessment process in place by program

 X yes _____no

Describe:

We have QA/QI programs for every substantive area on campus.

14. Additional information:

N/A

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form

Date: September 10, 2014
Prepared by: Cynthia Brammeier
Contact #: 471-9155

1. Program name, mission, description, history

Aging Services – Care Management

Mission:

This program was designed as a nursing home diversion effort and is intended to assist seniors above Medicaid income limits to receive the assistance they need to plan and secure long-term care in community settings. Care management units will provide ongoing consultation, assessment, care plan development, referral, and review for individuals, primarily older Nebraskans, in need of long-term care. With the individual's approval, the care management unit shall help coordinate the developed plan of care using the most appropriate available public and private resources to meet the individual's long-term care needs. Program serves individuals age 60 or older who reside in NE and are in need of Long-Term Care supports. Individuals with incomes between 0 and 300% FPL are eligible for services based on a sliding scale; individuals at higher incomes are expected to pay full cost of service.

History:

Legislation enacted in 1987 established Nebraska's Care Management Program

2. Program Manager, phone number: Courtney Miller, 471-9185
3. # of State Employees: 1.0 FTE
4. # of clients served by program: 6,279 clients served in SFY 2014
5. Total Budget Amount: \$2,128,869 in general funds expended in SFY 2014 in Program 559.
6. Federal Funds yes **X** no
\$
% of budget
7. State General Funds **X** yes no
\$2,128,869 in general funds expended SFY 2014
100% of budget
8. State Cash Funds yes **X** no
\$
% of budget

9. Specified Tax Source yes **X** no
Name
\$ Amount
10. Contract with private providers for services yes **X** no
Providers
\$ contracted
Clients served
11. Grant awarded by program **X** yes no
Grantees 8 Area Agencies on Aging
\$ Grants \$2,128,869 SFY 2014.
Clients served: 6,279 clients served in SFY 2014.
12. Mandated services
State: **X** yes no
Statute citation: Nebraska State Statute Sections 81-2229 through 81-2236
Federal: yes **X** no
Oversight agency: NE DHHS/Division of Medicaid & Long-Term Care/ State Unit on Aging
Regulation citation: NAC Title 15 Chapter 2
13. Evidence-based performance assessment process in place by program
yes **X** no

Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

DHHS Program Data and Information Form

Date: September 10, 2014

Prepared by: Cynthia Brammeier

Contact #: 471-9155

1. Program name, mission, description, history

Aging Services – Community-Based Aging Services (CASA)

Mission:

The statute defines legislative intent for the program as follows: The Nebraska Community Aging Services Act is intended to

- (1) define the state's long-term care policy and program for older individuals in all areas of the state,
- (2) define and recognize a system for planning, administering, and delivering such program,
- (3) provide for the coordination and integration of all community activities and services into a comprehensive, coordinated program, and
- (4) provide authority for state funding of such program.

Persons served are individuals age 60 or older; non-elderly caregiver spouse eligible for certain services.

History:

Nebraska's Community Aging Service Act was passed in 1982.

2. Program Manager: Courtney Miller, 471-9185
3. # of State Employees: 9.0 FTE
4. # of clients served by program: 35,561 persons in FFY 2014
5. Total Budget Amount: \$15,348,051 funds expended in SFY 2014 from Program 571.
6. Federal Funds **X** yes ___ no
\$7,898,971 expended in SFY 2014
% of budget 51.5%
7. State General Funds **X** yes ___ no
\$7,449,080 expended in SFY 2014
% of budget 48.5%

8. State Cash Funds ___ yes **X no**
\$
% of budget
9. Specified Tax Source ___ yes **X no**
Name
\$ Amount
10. Contract with private providers for services ___ yes **X no**
Providers
\$ contracted
Clients served
11. Grant awarded by program **X yes** ___ no
Grantees 8 (Nebraska's 8 Area Agencies on Aging) (note, grants are actually awarded by Older Americans Act Title Designation line and by program, and not every AAA has every program. Detailed list can be supplied upon request.)
\$ Grants \$15,348,051 granted SFY 2014
12. Mandated services
State: **X yes** ___ no
Statute citation: Nebraska State Statute Sections 81-2201 through 81-2228
Federal **X yes** no Older Americans Act
Oversight agency: Administration for Community Living/Administration on Aging
Regulation citation: NAC Title 15 Chapter 1
13. Evidence-based performance assessment process in place by program
yes **X no**

Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Medicaid and Long-Term Care
Fiscal Year 2013-2014**

Date: September 10, 2014
Prepared by: Ruth T. Vineyard
Contact #: 471-9567

1. Program name, mission, description, history

CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

The CHIP program began in 1997 as a way for families to provide health care to their children if they could not afford private health insurance. Children whose family income falls between the Medicaid eligibility guidelines and 213% of the Federal Poverty Level and do not have creditable insurance coverage are eligible. States had the option to implement CHIP as a stand-alone program, a Medicaid expansion or a combination of both. Nebraska implemented CHIP as a Medicaid expansion which means that services available to CHIP children correspond to services available to Medicaid children.

The 599 CHIP was implemented in July of 2012 as a stand-alone program per Legislative Bill 599. 599 CHIP covers unborn children of pregnant woman who are otherwise ineligible for coverage under Medicaid. The unborn(s) family income must fall under 197% of the Federal Poverty Level and the pregnant woman cannot have creditable insurance coverage. This program allows for prenatal care and pregnancy-related services connected to the health of the unborn child. Medical issues separate to the pregnant woman and unrelated to the pregnancy are not covered under 599 CHIP.

The 2101(f) CHIP was implemented on January 1, 2014 as a stand-alone program per the Affordable Care ACT (ACA). Children who lose Medicaid or CHIP eligibility (with or without health insurance) due to the elimination of disregards as a result of the conversion to Modified Adjusted Gross Income (MAGI) methodologies are eligible for protective Medicaid coverage for one year if the child had Medicaid as of December 31, 2013, unless specific conditions or exceptions are met. This protected group expires December 31, 2015.

2. Program manager, phone number: Ruth T. Vineyard, 471-9567
Courtney Miller, 471-9185
Jeanne Larson, 471-0300
3. # of State Employees: 630 (Medicaid and CHIP)
4. # of clients served by program: 34,119 average monthly CHIP eligibles
5. Total Budget Amount: In SFY 2014, \$84,375,365

6. Federal Funds yes no In SFY 2014, the average federal match rate was 68.50% (69.03% for July – September 2013, 68.32% for October 2013 – June 2014).
7. State General Funds yes no In SFY 2014, the average state match rate was 31.50% (30.97% for July – September 2013, 31.68% for October 2013 – June 2014).
8. State Cash Funds yes no In SFY 2014, \$7,085,700
9. Specified Tax Source yes no
10. Contract with private providers for services yes no

CHIP, in Nebraska, is administered like the Medicaid program. The Medicaid program enters into provider agreements with medical providers including doctors, hospitals, therapists, etc. and also contracts with a managed care organization to provide health care services to clients in managed care. Additionally, Medicaid contracts for a variety of administrative services.

11. Grant awarded by program yes no
12. Mandated services
State: yes no
Statute citation: Chapter 68 of the Nebraska Revised Statutes
Federal: yes no
States do not have to participate in the Medicaid program but, if they do, they must comply with federal requirements in order to receive federal matching funds.
Oversight agency: Centers for Medicare and Medicaid Services (CMS)
Regulation citation: Titles 404, 465, 468, 469, 470, 471, 474, 477, 479, 480, 482, N.A.C.
13. Evidence-based performance assessment process in place by program
 yes no
Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

**DHHS Program Data and Information Form
Division of Medicaid and Long-Term Care
Fiscal Year 2013-2014**

Date: September 11, 2014
Prepared by: Ruth T. Vineyard
Contact #: 471-9567

1. Program name, mission, description, history

MEDICAID

The Medicaid program is a federal and state cooperative program which originated with the passage of Title XIX of the Social Security Act in 1965. The purpose of the Medicaid program is to pay for health services to qualifying children and their families, the elderly and the disabled. State statutes governing the Nebraska Medical Assistance Program are located in Chapter 68 of the Nebraska Revised Statutes.

2. Program manager, phone number: Ruth T. Vineyard, 471-9567
Courtney Miller, 471-9185
Jeanne Larson, 471-0300
3. # of State Employees: 630 (Medicaid and CHIP)
4. # of clients served by program: 201,959 average monthly Medicaid eligibles.
5. Total Budget Amount: In SFY 2014, \$1,848,101,349
6. Federal Funds yes no In SFY 2014, the average federal match rate was 55.00% (55.76% for July - September 2013, 54.74% for October 2013 - June 2014).
7. State General Funds yes no In SFY 2014, the average state match rate was 45.00% (44.24% for July - September 2013, 45.26% for October 2013 - June 2014).
8. State Cash Funds yes no In SFY 2014, \$ 38,681,662
9. Specified Tax Source yes no
10. Contract with private providers for services yes no
The Medicaid program enters into provider agreements with medical providers including doctors, hospitals, therapists, etc. and also contracts with a managed care entities to provide health care services to clients in managed care. Additionally, Medicaid contracts for a variety of administrative services.
11. Grant awarded by program yes no

12. Mandated services
State: yes no
Statute citation: Chapter 68 of the Nebraska Revised Statutes
Federal: yes no
States do not have to participate in the Medicaid program but, if they do, they must comply with federal requirements in order to receive federal matching funds.
Oversight agency: Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services
Regulation citation: Titles 15, 202, 402, 405, 465, 470, 471, 477, 479, 480, 482, N.A.C.
13. Evidence-based performance assessment process in place by program
 yes no

Describe:
14. Additional information:

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS:

Table of Contents
Community and Rural Health Planning Unit

Program 179 – Administration

| | |
|---|----|
| Office of Community Health & Performance Mgmt Preventive Block Grant (PHHS) . . . | 1 |
| Eastern Satellite Office | 3 |
| Healthy People 2020 | 5 |
| Office of Health Disparities/Health Equity | 6 |
| Office of Public Health | 8 |
| Primary Care Office | 10 |
| Public Health Infrastructure Grant | 12 |
| Rural Flex Grant - EMS | 14 |
| Rural Health Administration | 16 |
| State Office of Rural Health Grant | 18 |
| Rural Health Flexibility Grant | 20 |
| Small Rural Hospital Improvement | 22 |
| State Partnership Grant to Improve Minority Health | 24 |
| Western Satellite Office | 26 |

Program 262 – Administration

| | |
|--|----|
| Community and Rural Health Planning | 28 |
| Critical Incident Stress Management (CISM) | 30 |
| Developmental Disabilities Planning Council Administration | 32 |
| Emergency Medical Services | 34 |
| Emergency Medical Services for Children | 36 |
| Trauma System | 38 |

Programs 175, 502, 514, 621 – Aid

| | |
|---|----|
| Community Health Centers (CHCs and Dental Health) | 41 |
| EMS Continuing Education - Aid | 43 |
| EMS Cardiac Monitors - Aid | 45 |
| Minority Health Initiative Grants & Omaha Federally Qualified Health Centers - Aid | 47 |
| Native American Education and Prevention - Aid | 49 |
| Nebraska Loan Repayment Program - Aid | 51 |
| Nebraska Rural Health Student Loan Program - Aid | 54 |
| Local Health Department Prevention | 58 |
| Public Health Centers | 60 |
| Public Health Infrastructure and Per Capita Aid | 62 |
| Stem Cell Research Grants | 64 |

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit
State Fiscal Year 2013/2014**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Office of Community Health and Performance Management Preventive Block grant (PHHS), Accounting codes: Operating - 179/480/092; Aid – 514/930/097. Develop public health capacity of the district health departments and to increase the skills and competencies of the public health workforce. This program is funded through an internal allocation from the Preventive Health and Health Services Block Grant.
2. Program manager, phone number: Colleen Svoboda, 471-7779
3. Number of State Employees: 1.75 FTEs
4. Number of clients served by program: All Nebraska citizens
5. Total Amount: \$174,190
6. Federal Funds: Yes
\$174,190
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes - \$5,000 to provide training for local health departments.
11. Grant awarded by program: Yes, in the PHHS Aid program (514/960/097).
\$66,700 to collect public health data and for six local health department to implement evidence-based public health strategies.
12. Mandated services

State: No
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Each grantee must submit a semi-annual progress report that identifies their accomplishments.

14. Additional information: None

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Eastern Satellite Office, Accounting code 179/480/079
In accordance with Neb. Rev. Stat. §71-1628.07 the office coordinates and administers state policy relating to minority health to diminish the effects of disparate health outcomes among racial and ethnic groups residing in Nebraska's Second Congressional District. Activities include administrative oversight of Minority Health Initiative funds, Every Woman Matters funds, and Maternal and Child Health and Preventive Health block grants funds received as internal DHHS allocations.
2. Program manager, phone number: Dianne Harrop, 402-595-1426
Josie Rodriguez Administrator, 402-471-1409
3. Number of State Employees: 2 FTEs
4. Number of clients served by program:
155,042 Minority populations in Congressional District 2
5. Total Amount: \$114,387
6. Federal Funds: No
7. State General Funds: Yes
\$13,793
12% of expenses
8. State Cash Funds: Yes
\$100,669
88% of expenses
9. Specified Tax Source: None
10. Contract with private providers for services: No

11. Grant awarded by program:

*See Aid Program 502/930/029 for Minority Health Initiative Grants.

12. Mandated services

State: Yes, Statute citation: 71-1628.07

Federal: No

13. Evidence-based performance assessment process in place by program: Division and Office strategic plans are implemented and evaluated for progress.

14. Additional information:

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Healthy People 2020, Accounting Code: 179/480/103
Develop Nebraska Healthy People 2020 objectives that are multidimensional and action-oriented, and allows the constituents to access the information efficiently.
2. Program manager, phone number: Colleen Svoboda, 471-7779
3. Number of State Employees: None
4. Number of clients served by program: All Nebraska citizens
5. Total Amount: \$1,849
6. Federal Funds: None
7. State General Funds: None
8. State Cash Funds: Yes, Source of funds is a Foundation grant
100% of expenses
9. Specified Tax Source: None
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: Supports educational and meeting opportunities regarding performance management.
14. Additional information: None

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Office of Health Disparities/Health Equity (Accounting code 179/480/077)
Provides funding for: Office Administrator, who provides oversight and leadership to the Lincoln and satellite offices, provides information to the Division of Public Health related to the elimination of health disparities and the promotion of cultural competency; Health Program Managers and one Health Surveillance Specialist act as liaisons to the community and Tribes, duties include monitoring, tracking, overseeing and providing technical assistance, data support and training to the recipients of the Minority Health Initiative Grants in Congressional District 1, and to staff of DHHS. Program Managers also oversee one federal grant, Native American Public Health Act funds, and administer internal allocations of block grant funds and Every Woman Matters funds. Two Administrative Assistants provide support to the Office as well as to the satellite offices.
2. Program manager, phone number: Josie Rodriguez, 471-1409
3. Number of State Employees: 6 permanent and 3 temporary staff
4. Number of clients served by program:
326,588 - Minority populations in Nebraska (based on 2010 Census)
5. Total Amount: \$639,711
6. Federal Funds: Yes
\$256,404
40% of expenses
7. State General Funds: Yes
\$383,307
60% of expenses
8. State Cash Funds: No

9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 26
\$ contracted: \$159,503
Clients served: 1262 plus other Nebraskans who benefit from training, technical assistance and data information.
11. Grant awarded by program: Yes
Grantees: 2
\$ Grants: \$4,000
Clients served: 135
*See Aid Program 502/930/029 for Minority Health Initiative Grants
*Funding in items 10 & 11 above include internal funding allocated to the office by other DHHS Division of Public Health federally funded programs.
12. Mandated services:
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: Yes
The American Indian projects are required to use evidence-based strategies and associated evaluation indicators. The Minority Health Initiatives use evidence-based strategies in projects and as well as external evaluators to conduct fidelity assessments. CATCH Kids Club: Evidence based program funded with Maternal and Child Health federal funding. Pre, and post assessments completed for workshops and trainings.
14. Additional information:
Funds are allocated to support skilled staff time to research and educate state and local public health service providers on evidence-based strategies, culturally-specific risk/protective factors and cultural adaptation process relevant to high priority health disparities in Nebraska.
- The Native American Health Liaison provides Tribal-liaison services, Tribal project management assistance, and/or minority data support to various components of DHHS, including, but not limited to the Division of Public Health Community Health Section (all Units), Division of Behavioral Health and the Division of Medicaid/Long Term Care.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Office of Public Health, Accounting code - 179/480/101:
Provide administrative and operational oversight to the staff and programs located in the Office of Community Health and Performance Management.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: 2.5 FTEs
4. Number of clients served by program: All Nebraska citizens
5. Total Amount: \$347,605
6. Federal Funds: None
7. State General Funds: Yes
\$247,605
71% of expenses
8. State Cash Funds: \$100,000
29% of expenses
9. Specified Tax Source: None
10. Contract with private providers for services: 2 – provide technical assistance and training to local health departments to improve public health infrastructure and prepare for accreditation.
\$Contracts: \$100,000
#Clients served: 21 local health departments impacting the populations they serve which is all Nebraskans.
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Oversee preparation for national accreditation which meets national standards of practice including a performance management system.

14. Additional information: none

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Primary Care Office, Accounting code: 179/480/067
Provide data for the designation of federal shortage areas & maintenance/expansion of health care access.
2. Program manager, phone number: Tom Rauner, 471-0148
3. Number of State Employees: 1 FTE
4. Number of clients served by program: 800,000 citizens have been identified as medically underserved. Approx. 58,500 residents are served by 46 National Health Service Corps providers and 58,500 residents are served by 39 J-1 providers (International Medical graduates) for a total of 127,500 residents served.
5. Total Budget Amount: \$183,264
6. Federal Funds: Yes
\$183,264
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
#Providers: 3
\$Contracts: \$60,000
#Clients served: Medically underserved people in Nebraska
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Grant performance measures from Health Resources & Services Administration (HRSA), Office of Shortage Designation.

14. Additional information:

Funded by the federal HRSA, grant CFDA #93.130

This grant supports 1 FTE and supports two part-time interns.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Public Health Infrastructure Grant, Accounting codes: Operating 179/480/111;
Aid 514/930/113
 - Create a Division of Public Health performance management program to develop accreditation review and quality improvement processes.
 - Create a workforce development program to provide training to statewide public health professionals on policy, environmental, and systems change strategies as well as performance improvement.
 - Build collaboration across the Division of Public Health.
 - Build data capacityThis was to be a five-year grant funded by the Centers for Disease Control (CDC); however, funding was discontinued making this fourth year the last year.
2. Program manager, phone number: Colleen Svoboda, 471-7779
3. Number of State Employees: 2 FTEs
4. Number of clients served by program: statewide impact
5. Total Amount: \$830,199
6. Federal Funds: Yes
\$830,199
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: No
#Providers:
#Contracted Amt:

#Clients served: statewide impact

11. Grants awarded by program during the SFY 14 (payment for some grant activities will occur in SFY 15): Yes in the Aid category - Program 514, Division 930, subprogram 113

#Providers: 24 agreements

Contracted Amt: \$840,610 to improve the collection, analysis, and reporting of public health data; to complete a return on investment study on a public health program; to provide training to the public health workforce; to provide technical assistance and training to local health departments; to prepare local health departments for potential national accreditation by meeting the national public health standards; to implement quality improvement activities in local health departments; to establish performance measures for the State Health Improvement and Strategic Plans; to set up a data collection system for collecting syndromic surveillance data; and to facilitate focus groups. Some sub-grant payments will occur in the SFY15.

#Clients served: statewide impact

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Through this program the DHHS Division of Public Health will work toward national accreditation which is performance based.

14. Additional information:

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Rural Flex Grant – EMS Accounting code 179/480/105
Assist rural communities, hospitals and ambulance services in developing and sustaining a pre-hospital patient care system.
2. Program manager, phone number: Dean Cole, 471-0124
3. Number of State Employees: None
4. Number of clients served by program:
65 Critical Access Hospitals and approximately 336 rural ambulance services.
5. Total Amount: \$84,712
6. Federal Funds: Yes
\$84,712
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 19
\$ Contracted: \$97,003 (some contract payments will occur in SFY15)
Clients served: Rural Nebraskans
11. Grant awarded by program: No
12. Mandated services
State: No
Federal: No

13. Evidence-based performance assessment process in place by program:
See item 14 below for information about assessments completed for communities.

14. Additional information:

This federal program was developed to assist rural communities, hospitals and ambulance services in developing and sustaining a pre-hospital patient care system. The majority of the money spent for this program is to provide emergency medical services assessments for rural communities and counties. The purpose of the assessment is to assist rural communities and counties in evaluating specific needs of local ambulance services to assist them in strategic planning. This program also helps to support trauma center certifications, the state EMS physician director, and leadership training for ambulance service managers and personnel.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: _Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Rural Health Administration, Accounting code 179/480/025
Provide administrative and operational oversight to the staff and programs located in the Office of Rural Health to assure the availability & accessibility of quality health care services to rural Nebraskans. Administer the health professionals' student loan and loan repayment programs. Staff the Rural Health Advisory Commission (RHAC).
2. Program manager, phone number: Margaret Brockman 402-471-6057
3. Number of State Employees: 4.25 FTEs
4. Number of clients served by program: Rural Nebraska's population
5. Total Amount: \$276,914
6. Federal Funds: No
7. State General Funds: Yes
\$271,654
98% of expenses
8. State Cash Funds: Yes
\$5,260
2% of expenses
9. Specified Tax Source: None
10. Contract with public contractors for services: No
Providers:
\$ contracted: \$
Clients served:
11. Grant awarded by program: No

12. Mandated services

State: Yes, Statute citation: 71-5646 to 71-5649 establishes the Office of Rural Health and §71-5650 to §71-5670 is the Nebraska Rural Health Systems and Professional Incentive Act.

Federal: No

13. Evidence-based performance assessment process in place by program: Yes, performance measures as required for the federal HRSA Office of Rural Health Grant.

14. Additional information:

The powers and duties of the Rural Health Advisory Commission are documented in §71-5659 and include “(1) advise the department regarding the development and implementation of a state rural health policy;... (6) prepare recommendations to the appropriate bodies to alleviate the problems identified;... and (9) select recipients of financial incentives available under the act.”

Commission members are appointed by the Governor and confirmed by the Legislature. RHAC members are “...reimbursed for their actual and necessary expenses as provided in sections 81-1174 to 81-1177 from funds appropriated for the Rural Health Systems and Professional Incentive Act.” (§71-5656)

It is the RHAC that determines how the funds appropriated for the Rural Health Systems and Professional Incentive Act are allocated each year to the two incentive programs (student loan and loan repayment programs).

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history:
State Office of Rural Health Grant - Accounting code 179/480/026
The grant provides funds to strengthen rural health care delivery systems. The goals are 1) to assist in the coordination of health care delivery through the development of State level rural health leadership; and 2) to facilitate partnerships and collaboration at the national and State levels to improve the exchange of information and engage in collaborative activities for supporting rural health.
2. Program manager, phone number: Margaret Brockman, 471-6057
3. Number of State Employees: .33 FTE
4. Number of clients served (or population impacted) by program: 800,000, which is the state's rural and underserved population estimate.
5. Total Budget Amount: \$152,090
6. Federal Funds: 100%
7. State General Funds: None
8. State Cash Funds: No
9. Specified Tax Source: None
10. Contract with private providers for services: Yes, ten contracts
 \$ Contracted - \$121,465
 # Clients – Rural Nebraskans
11. Grant awarded by program: No
12. Mandated services
 State: Yes, related to statute citation: §71-5646 - 71-5649
 Federal: No

13. Evidence-based performance assessment process in place by program:
Federally required grant performance measures.

14. Additional information:

This is a HRSA Office of Rural Health Grant. CFDA #93.913

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Rural Health Flexibility Grant - Accounting codes: Operations - 179/480/027;
Aid – 514/930/127
Work collaboratively to strengthen Critical Access Hospitals and build a sustainable rural health care delivery system.
2. Program managers, phone numbers: Margaret Brockman, 471-6057
3. Number of State Employees: .42 FTE
4. Number of clients served by program: 800,000+ (rural underserved areas)
5. Total Amount: \$645,009
6. Federal Funds: Yes
\$645,009
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 2
\$ Contracted - \$19,000
Clients – statewide impact
11. Grant awarded by program: Yes
Providers: 11 hospitals, networks, or medical centers
\$ Contracted - \$567,234
Clients – 65 hospital service area and patients

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Requirements for periodic reporting are in each contract (program deliverables).

Federal requirements – for quality and reasonable overall improvement – required performance standards reporting.

14. Additional information:

Federal funding provided from the Health Resources & Service Administration (HRSA), CFDA #93.241

Examples of activities are: Team Strategies and Tools to Enhance Performance and Patient Safety; Nebraska Hospital Association Website information; Balanced Scorecard [management training]; and Quality Improvement training.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Small Rural Hospital Improvement, Accounting code 179/480/094
Assist rural communities in developing a health care system that provides accessible, high quality health care services.
2. Program manager, phone number: Margaret Brockman, 471-6057
3. Number of State Employees: None
4. Number of clients served by program: Rural Nebraskans
5. Total Amount: \$575,792
6. Federal Funds: Yes
\$575,792
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: No
11. Grant awarded by program: Yes, budgeted in program 514/930/194
Providers 66
\$ contracted \$575,792
Clients served: 66 Rural Hospitals
12. Mandated services
State: No
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Each hospital is required to prepare an annual progress report that identifies their activities and accomplishments.

14. Additional information: none

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
State Partnership Grant to Improve Minority Health, Accounting Code:
179/480/180
As part of a larger national strategy, the State Partnership Program seeks to facilitate the improvement of minority health and elimination of health disparities through the development of partnerships with state and territorial offices of minority health. Nebraska's project includes two objectives: 1) increase knowledge and awareness, implement culturally and linguistically appropriate services and programs, and increase access to healthcare services via improving the adoption and implementation of the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Healthcare and provision of cultural intelligence training in 15 counties in Nebraska with the largest minority populations; 2) increase knowledge and awareness, and increase access to healthcare services via provision of health education and screenings and provision of referrals or linkages to additional services for minorities in Nebraska counties with 5% or greater minority populations.
2. Program manager, phone number: Diane Lowe, 402-471-0881
Josie Rodriguez, Administrator, 402-471-1409
3. Number of State Employees: 1.25 FTE
4. Number of clients served by program: 15,997
5. Total Amount: \$182,176
6. Federal Funds: Yes
\$182,176
100% of expenses
7. State General Funds: None
8. State Cash Funds: None

9. Specified Tax Source: None

10. Contract with private providers for services: Yes
 - #Providers: 2
 - \$Contracted: \$21,446
 - #Clients served: 281

11. Grant awarded by program: No

12. Mandated services
 - State: No
 - Federal: No

13. Evidence-based performance assessment process in place by program: Yes
 - As required by the federal grant.

14. Additional information:
 - Direct medical and dental services are not allowed under this grant.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Western Satellite Office, Accounting code 179/480/078
In accordance with Neb. Rev. Stat. §71-1628.07 the office coordinates and administers state policy relating to minority health in order to diminish the effects of disparate health outcomes among racial and ethnic groups residing in Nebraska's Third Congressional District. Activities include administrative oversight of Minority Health Initiative funds awarded and Maternal and Child Health Block Grant funds allocated to the Office of Health Disparities and Health Equity.
2. Program manager, phone number: Maria Hines, 308-385-6143
Josie Rodriguez, Administrator, 402-471-1409
3. Number of State Employees: 2.75 FTEs
4. Number of clients served by program: 80,189
All minority populations in Congressional District 3
5. Total Amount: \$141,464
6. Federal Funds: No
7. State General Funds: Yes
\$33,742
24% of budget
8. State Cash Funds: Yes
\$107,723
76% of budget
9. Specified Tax Source: None

10. Contract with private providers for services: No
11. Grant awarded by program:
*See Aid Program 502/930/029 for Minority Health Initiative Grants, some of which are overseen by this Western Office.
12. Mandated services
State: Yes, Statute citation: 71-1628.07
Federal: No
13. Evidence-based performance assessment process in place by program: Yes
The Minority Health Initiatives use evidence-based strategies in projects and as well as external evaluators to conduct fidelity assessments. Evidence based program funded with Maternal and Child Health federal funding. Pre, and post assessments completed for workshops and trainings.
14. Additional information:

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Community and Rural Health Planning Accounting code: 262/480/001
Provide oversight and direction to administrators, staff and programs in the Offices of Emergency Medical Services, Community Health and Performance Management, Rural Health, Developmental Disabilities Planning Council, and Health Disparities and Health Equity.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: 2 FTEs
4. Number of clients served by program:
All Nebraskans are served through the programs in the Offices overseen.
5. Total Amount: \$144,488
6. Federal Funds: Yes, 100%
7. State General Funds: None
8. State Cash Funds: No
9. Specified Tax Source: None
10. Contract with private providers for services: No
Providers:
\$ Contracted: \$
Clients served:
11. Grant awarded by program: No
12. Mandated services
State: No
Statute citation:

Federal: No

13. Evidence-based performance assessment process in place by program: Yes, each program has evidence-based performance measures.

14. Additional information:

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: _Sue Medinger

Contact Number: 471-0191

15. Program name, mission, description, history

Critical Incident Stress Management (CISM), Accounting code: 262/480/023

The Critical Incident Stress Management Program was created by the Nebraska Legislature in 1991 (Statute citation: 71-7101 to 71-7113). The focus of the program is designed to minimize the harmful effects of critical incidents stress for emergency service personnel, with a high priority on confidentiality and respect for the individuals involved. The program shall:

- Provide a stress management session to emergency services personnel who appropriately request such assistance in an effort to address critical incident stress while performing their duties;
- Assist in providing the emotional and educational support necessary to ensure optimal functioning of emergency service personnel;
- Conduct pre-incident educational programs to acquaint emergency service personnel with stress management techniques.
- Promote interagency cooperation;
- Provide an organized statewide response to the emotional needs of emergency service personnel impacted by critical incidents.

16. Program manager, phone number: Dean Cole, 471-0124

17. Number of State Employees: none, supported with the EMS program 262/480/19

18. Number of clients served by program:

424 transporting and non-transporting ambulance services, 88 Nebraska hospitals personnel and physicians, 241 law enforcement agencies, 4,094 certified law enforcement officers, over 4,000 correctional officers, 518 fire departments, and 14,000 fire fighters.

19. Total Amount: \$4,901

20. Federal Funds: None

21. State General Funds: None

22. State Cash Funds: Yes

\$4,901

100% of expenses

23. Specified Tax Source: No

Fifty Cents for Life – 50¢ is paid each time a vehicle is registered.

Note: this is a fee, not a tax. 71-51, 103 Nebraska Emergency Medical System Operations Fund and Nebraska Revised Statute 60-3,156. Since the Emergency Medical Services (EMS) Program is designated the lead agency for the Critical Incident Stress Management Program it uses 50 Cents for Life Funds from the EMS Program to support the program.

24. Contract with private providers for services: Yes

Providers: 5

\$ Contracted: \$1,110

Clients served: develop peer-to-peer training for responders. Statewide impact.

25. Grant awarded by program: No

26. Mandated services

State: Yes

Statute citation: 71-7101 to 71-7113

Federal: No

27. Evidence-based performance assessment process in place by program: No

28. Additional information:

The program is funded by receipts from the 50¢ for Life Program which assesses a fee paid each time a vehicle is registered in Nebraska. This program started in 1991. It is jointly sponsored by the Health and Human Services Division of Public Health, Emergency Medical Services/Trauma Program and Division of Behavior Health, Nebraska State Patrol, Nebraska Fire Marshal and Nebraska Emergency Management Agency. Health and Human Services Division of Public Health EMS/Trauma Program is designated the lead agency in statute. The EMS/Trauma Program provides the funding and support services for the program.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: _Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Developmental Disabilities Planning Council Administration, Accounting codes: Operating 262/480 subprograms: 06, 113, 14, 115, 40; Aid 514/930 subprograms 012,013, 014, 015, 019 Aid
Legislative activities, employment, child development, system coordination and planning activities regarding people with disabilities.
2. Program manager, phone number: Mary Gordon, 471-0143
3. Number of State Employees: 3
4. Number of clients served by program: People in Nebraska with disabilities, approx. 32,400.
5. Total Amount: \$465,059
6. Federal Funds: Yes
\$446,877
96% of expenses
7. State General Funds: Yes
\$18,182
4% of expenses
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: No
11. Grant awarded by program: Yes
Grantees: 19
\$ Grants: \$219,562
Clients served: 2,393 + 10,808 members of the public reached

12. Mandated services

State: Yes, the DD Planning Council exists by executive order of the Governor.

Federal: Yes

Oversight agency: Administration on Intellectual and Developmental Disabilities

Regulation citation: Public Law 106-402

13. Evidence-based performance assessment process in place by program: Yes

Federally mandated Program Performance Report

14. Additional information: None

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Emergency Medical Services - Accounting code: 262/480/019
Provide technical assistance, continuing education and support to Nebraska ambulance services, pre-hospital providers, hospitals, and other medical personnel. Plus is the lead agency in providing Critical Incident Stress Management services to emergency providers in the State of Nebraska.
2. Program manager, phone number: Dean Cole, 471-0124
3. Number of State Employees: 9
4. Number of clients served by program:
Over 8,000 pre-hospital providers; 424 transporting and non-transporting ambulance services, and 88 Nebraska hospitals plus hospital personnel and physicians.
5. Total Amount: \$671,129
6. Federal Funds: \$42,827
6% of expenses
7. State General Funds: None
8. State Cash Funds: Yes
\$628,302
94% of expenses
9. Specified Tax Source: No
Fifty Cents for Life – 50¢ is paid each time a vehicle is registered.

Note: this is a fee, not a tax. Nebraska Emergency Medical Systems Operations Fund 71-51,103 and Nebraska Revised Statute 60-3,156.
10. Contract with private providers for services: Yes

Providers: 6
\$ Contracted: \$146,469
Clients served: 424 Ambulance services.

11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: 38-1201 to 38-1237 is the statute pertaining to EMS and Trauma responsibilities, but it does not mandate the program.

Federal: No

13. Evidence-based performance assessment process in place by program: Data collection meets national standards and is used in crash data report and other evaluation to determine and improve performance.

14. Additional information:

The program is funded by receipts from the 50¢ for Life Program which assesses a fee paid each time a vehicle is registered in Nebraska. The EMS program started in 1972. It provides technical assistance, continuing education and support to Nebraska ambulance services, pre-hospital providers, hospitals and other medical personnel. It plays a key role in assuring that over 800 patients a day are transported to hospitals and other care facilities in the state. Regarding the 50 Cents for Life Program, initially there was more revenue than needed with the extra put into a reserve fund. Currently expenses are exceeding revenue and drawdown on the reserve funds continues at a significant rate because of an increasing number of rural hospitals becoming level 4 Trauma Centers and funds transferred to Licensure and Investigations.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: _Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Emergency Medical Services for Children - Accounting code: 262/480/149
Provide training, technical assistance and system development in pediatric care for pre-hospital providers, physicians and hospital personnel. The main emphasis of this program is to assist rural hospitals in implementing pediatric protocols to assure a better delivery of emergency care for the pediatric patient.
2. Program manager, phone number: Debbie Kuhn, 471-0119
Dean Cole, 471-0124
3. Number of State Employees: 1 FTE
4. Number of clients served by program:
424 transporting and non-transporting ambulance services, and 88 Nebraska hospitals plus hospital personnel and physicians.
5. Total Amount: \$131,018
6. Federal Funds: Yes
\$131,018
100% of expenses
7. State General Funds: None
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 39
\$ Contracted: \$99,591 (some payments will occur in SFY15)
Clients served: 894 + a statewide impact
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program:

Established by federal grant guidelines.

14. Additional information:

This is a federal program to assist states in working with pre-hospital providers, physicians, hospitals and hospital personnel in improving pediatric emergency care in Nebraska. This federal program was implemented for states after a national study showed there was a serious need to improve emergency pediatric care especially in rural areas. The Nebraska EMS/Trauma program conducted a study to find weak areas in the state and specific pediatric emergency care issues that needed to be addressed. Some of those specific care issues were lack of pediatric training, lack of pediatric protocols and delays in transporting pediatric patients to higher levels of care. The EMS/Trauma Program has been addressing these issues by providing training, developed statewide pediatric protocols, and improved communication between rural hospitals and trauma centers.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Trauma System, Accounting code: 262/480/021
The statewide trauma system makes the delivery of trauma care cost effective, reduces the incidence of inappropriate or inadequate trauma care, prevents unnecessary suffering, and reduces the personal and societal burden resulting from trauma. The goals and objectives of a trauma care system include:
 - Providing optimal care for the trauma victim;
 - Preventing unnecessary death and disability from trauma and emergency illness; and
 - Conducting trauma prevention and education activities to decrease the incidence of trauma.

2. Program manager, phone number: Sherri Wren, 471-0539
Dean Cole, 471-0124

3. Number of State Employees: 1

4. Number of clients served by program:
Provides training on service delivery and data collection to over 8,000 pre-hospital emergency personnel and 2,800 physicians and hospital personnel. Designated 46 hospitals for trauma care. Trauma services are provided to all citizens and individuals who visit our state.

5. Total Amount: \$252,222

6. Federal Funds: None

7. State General Funds: None

8. State Cash Funds: Yes
\$252,222
100% of expenses

9. Specified Tax Source: No

Fifty Cents for Life – 50 cents is paid each time a vehicle is registered.

Note: this is a fee, not a tax. Nebraska Emergency Medical Systems Operations Fund 71-51, 103 and Nebraska Revised Statute 60-3, 156.

10. Contract with private providers for services: Yes
 - # Providers: 68
 - \$ Contracted: \$223,402 (some payments will occur in SFY15)
 - # Clients served: Forty-six designated hospitals; and provides support services to 424 ambulance services and 2,800 physicians and hospital personnel.

11. Grant awarded by program: No

12. Mandated services:
 - State: Yes, Statute Citation: 71-8201 to 71-8253
 - Federal: No

13. Evidence-based performance assessment process in place by program:
 - Established in statute and regulations.

14. Additional information: In 1994 Legislative Bill 1223 was passed. LB 1223 called for the development of a statewide trauma plan. The State Trauma Development Board was created and members appointed. In July of 1996 the trauma plan was completed, published, and presented to the legislature. In June of 1997 Neb. Rev. Stat. 71-8201 – 71-8253 (1997) the Statewide Trauma Systems Act (LB 626) was passed which created the infrastructure for the trauma system. The bill included an appropriation of \$200,000 per biennium for implementation of the system.

In April 2001, LB 191 (Fifty-cents for Life) was signed by the Governor which created a new funding source. This fund is generated from fifty cents on the state motor vehicle tax which is used to support the Emergency Medical Services, Critical Incident Stress Management and Trauma Programs.

In March 2002, the *Nebraska Statewide Trauma System Regulations* were adopted by the Governor. The regulations impact those out-of-hospital providers of emergency medical services, ambulance services, hospitals, and rehabilitation centers choosing to be a part of the trauma system. They also impact those members of the public who suffer traumatic injury.

The trauma regulations serve as the foundation for the development and implementation of the Statewide Trauma System. These rules establish a process and standards by which hospitals, urgent care facilities, and rehabilitation facilities may be designated as trauma care centers (four levels) specialty trauma

care centers (two types) and rehabilitations centers (four levels). The rules also establish a communication system to coordinate the movement of patients within the system and an information registry to collect and disseminate trauma-related data.

In August 2009 LB195 was passed. LB195 amended the Statewide Trauma System Act to include:

1. Redefining advanced level trauma center, basic level trauma center, comprehensive level trauma center, general level trauma center, trauma, trauma team, trauma system, and communications system;
2. Replaced the term “medical controller” with “physician or qualified physician surrogate;”
3. Required the statewide emergency medical services and trauma plan to be updated every five years instead of every two years;
4. Amended the duties of the Department of Health and Human Services with respect to the Statewide Trauma System Act and;
5. Changed provisions with respect to designation of trauma centers.

The program is funded by receipts from the Fifty Cents for Life Program which assesses a fee paid each time a vehicle is registered in Nebraska. Initially there was more revenue than needed with the extra put into a reserve fund. Currently expenses are exceeding revenue and drawdown on the reserve funds at a significant rate. This is due to the fact that all four trauma regions are in operation, thus more hospitals have applied for trauma designation and those hospitals originally designated are applying for re-designation.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 9, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Community Health Centers (CHCs and Dental Health) -Accounting codes:
502/930/031 and 502/930/032
Provides assistance with the high percentage of uninsured people using
Community Health Centers.
2. Program manager, phone number: Tom Rauner, 471-0148
3. Number of State Employees: None
4. Number of clients served by program during calendar year 2013 as reported on
the federal Uniform Data System: 33,537 uninsured served in Nebraska by the
CHCs. This is 52% of patients seen at CHCs.
5. Total Amount: \$1,800,000 plus \$300,000 for dental care.
6. Federal Funds: None
7. State General Funds: Yes
\$2,100,000
100% of paid amount
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: None, see item 14 below
11. Grant awarded by program: No
12. Mandated services
State: Yes, Statute citation: Appropriations Bill

Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Uniform Data System data reporting required for this allocation.

14. Additional information: Funds are appropriated to DHHS to be passed through
to six CHCs.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
EMS Continuing Education - Aid - Accounting code: 514/960/119
Training money used to provide continuing education support for recertification for pre-hospital providers. All pre-hospital providers are required to have 20 hours of continuing education every two years to recertify as a pre-hospital provider (Title 172 NAC 11). Over 8,000 pre-hospital providers are provided the opportunity to utilize this training. Over 80% of these pre-hospital providers belong to volunteer ambulance services.
2. Program manager, phone number: Dean Cole, 471-0124
3. Number of State Employees: None, employee support is provided through the EMS/Trauma Office – Accounting code 262/480/019
4. Number of clients served by program: Over 8,000 pre-hospital providers
5. Total Amount: \$40,317
6. Federal Funds: None
7. State General Funds: Yes
\$39,517
84.53% of expenses
8. State Cash Funds: Yes
\$800
3.56% of expenses
9. Specified Tax Source: Cash fund source is receipts from the 50¢ for Life Program which assesses a fee paid each time a vehicle is registered in Nebraska.

10. Contract with private providers for services: Yes
Providers: 125
\$ Contracted: \$48,719 (some payments will occur in SFY15)
Clients served: 2,305
11. Grant awarded by program: No
12. Mandated services:
State: Yes, identified in LB 905 during the 2014 Legislative Session
Federal: No
13. Evidence-based performance assessment process in place by program: Training meets the required standards for EMS providers based on the national and state scope of practice for pre-hospital providers.
14. Additional information: Providing continuing education services to pre-hospital providers is essential in helping communities provide pre-hospital care especially in rural communities who utilize volunteer ambulance services. Without this service it would be very difficult and expensive for individual ambulance services to find the resources and qualified instructors to provide the required training. This program helps ambulance services with technical assistance, support and coordination of instructors to provide the training. The EMS Program plays a key role in working with ambulance services and hospitals to partner in providing continuing education training and assure there is no duplication of training in EMS regions. A single ambulance services especially in rural communities could not afford to bring a qualified instructor on its own to provide training without the support and coordination of the EMS Program through this funding source.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
EMS Cardiac Monitors - Aid - Accounting code: 514/960/120
Monitors will be distributed to ambulance services that are affiliated with an advance ambulance service and catheterization lab to build a STEMI system in Nebraska. This system will allow ambulance services to transmit EKG results from a cardiac patient to the forwarding hospital to determine if the patient is to go directly to the catheterization lab hospital. Time is of the essence with cardiac patients, making a difference between life/death and disability.
2. Program manager, phone number: Dean Cole, 471-0124
3. Number of State Employees: None, employee support is provided through the EMS/Trauma Office – Accounting code 262/480/019
4. Number of clients served by program: Initially rollout the monitors to ambulance services along the I-80 corridor because of wireless transmission capability of the area.
5. Total Amount: \$87,192
6. Federal Funds: None
7. State General Funds: Yes
\$87,192
100% of expenses
8. State Cash Funds: No
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 22 ambulance services
\$ Contracted: \$121,625 (some payments will occur during SFY15)
Clients served: Cardiac patients within the services areas of the 30 ambulance services.

11. Grant awarded by program: No

12. Mandated services:

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes,
evaluation will be done of the number of cardiac patient “saves” resulting from
the STEMI system.

14. Additional information:

DHHS Program Data and Information Form
Community and Rural Health Planning Unit

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Minority Health Initiative Grants & Omaha Federally Qualified Health Centers – Aid, Accounting code 502/930/029
Funds are distributed in Congressional Districts 1 and 3 to counties having 5% or greater racial ethnic minority population. Projects must address, but are not limited to, infant mortality, cardiovascular disease, obesity, diabetes and asthma in minority populations.

Also, \$1.37 million is distributed in Congressional District 2 to the Federally Qualified Health Centers (FQHCs): Charles Drew Health Center, and One World Community Health Center.
2. Program manager, phone number: Josie Rodriguez, 471-1409
3. Number of State Employees: None
Activities are supported by employees funded through the Office of Health Disparities and Health Equity (formerly the Office of Minority Health) accounting code 179/480/077 and 170/480/079.
4. Number of clients served by program: 44,813
Sixteen projects have been awarded funds for the project period 2013-2015, covering 44 counties in Districts 1 and 3. Two Federally Qualified Health Centers serve District 2. Clients served for the FQHCs were drawn from the federal Uniform Data System for calendar year 2013.
5. Total Amount: \$ 2,721,679
6. Federal Funds: None
7. State General Funds: Yes
\$63,501
2% of paid amount
8. State Cash Funds: Yes

\$2,658,178
98% of paid amount

9. Specified Tax Source: None

10. Contract with private providers for services: yes
 - # Grantees: 1
 - \$ Grants: \$25,860
 - # Clients served: minority population in 3 counties

11. Grant awarded by program: Yes
 - # Grantees: 15
 - \$ Grants: 1,538,281
 - # Clients served: minority populations in 41 counties (this excludes FQHC clients served as they are pass-through funds)

12. Mandated services
 - State: Yes, Statute citation: 71-1628.07 and the Appropriations Bill
 - Federal: No

13. Evidence-based performance assessment process in place by program: Yes
 - The Minority Health Initiatives use evidence-based strategies in projects as well as external evaluators to conduct fidelity assessments. Each grantee is required to have measurable process and outcome evaluation indicators appropriate for project objectives. Due to the wide range of objectives allowed under the Minority Health Initiative, the grantees are not required to measure a specific shared set of indicators, other than county minority population reached.

14. Additional information:
 - Funds are passed through to the two FQHCs in the Congressional District 2.
 - There are no contracts with them.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014
Prepared by: Sue Medinger
Contact Number: 471-0191

1. Program name, mission, description, history
Native American Education and Prevention – Aid, Accounting Code:
514/930/076
Provides funding to contract with the health clinics of Nebraska's federally recognized Native American tribes as approved by the tribal councils, Indian health organizations, or other public health organizations that have a substantial Native American clientele to provide educational and public health services pursuant to section 71-7617.
2. Program manager, phone number:
Blanca Ramirez-Salazar, Health Program Manager, 402-610-1910
Josie Rodriguez, Administrator, 471-1409
3. Number of State Employees: None, supported by Office of Health Disparities and Health Equity staff
4. Number of clients served by program: 3,500
5. Total Amount: \$505,519 (includes a payment based on previous year contract)
6. Federal Funds: None
7. State General Funds: Yes
\$505,519
100% of budget
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: Yes
Providers: 5
\$ contracted: \$500,000
Clients served: 3,500

11. Grant awarded by program: No

12. Mandated services

State: Yes, Statute citation: 71-7615 – 71-7622, Native American Public Health Act

Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Contractors are required to meet negotiated deliverables to provide educational and public health services as established by state statute targeted to Native American populations.

14. Additional information:

This program addresses high-priority public health needs of the Winnebago Tribe of Nebraska, Omaha Tribe of Nebraska, Ponca Tribe of Nebraska, Santee Sioux Nation-Nebraska, and the American Indian population residing in the Nebraska Panhandle (primarily Oglala and Sicangu Lakota).

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Nebraska Loan Repayment Program – Aid, Accounting code 175/920/055
The Nebraska Loan Repayment Program offers certain licensed health professionals assistance in paying off their government or commercial educational debt in return for agreeing to practice 3 years in a state-designated shortage area. This program requires a 50-50 state and local match. This allows communities in state-designated shortage areas the opportunity to compete with larger urban areas through the use of this program to retain and recruit health professionals.
2. Program manager, phone number: Marlene Janssen, 471-0778
3. Number of State Employees: None
Staff support is provided by the State Incentive Match program - Accounting code 179/480/025
4. Number of clients served (or population impacted) by program: over 700,000 rural and underserved population estimates. (The Rural Health Systems and Professional Incentive Act (§71-5650 - §71-5670) is a *public health program* and impacts *populations*; hence, the incentive programs impact between 700,000 and 800,000 residents of Nebraska.)
5. Total Program 175 paid in FY 2013-14: \$2,136,448
Total Loan Repayment Amount paid in FY 2013-14: \$1,598,479 as of June 30, 2014 (see note under #14)
Note: The Nebraska Loan Repayment Program requires a 3-year practice obligation; however, state funds may only be obligated for the current fiscal year. This means loan repayment funding obligations are *projected* over the 3-year practice obligation period.
6. Federal Funds: None
7. State General Funds: Yes
\$645,255
40% of the budget, (See note under #14)

8. State Cash Funds: Yes

\$953,225

60% of the Budget - includes local match spending authority (See note under #14)

Note: Cash spending authority is required for the local match funds and for spending state cash funds. Over the past 6 years the Legislature provided cash spending authority for the state match for loan repayment and for student loans (the other rural health incentive program) to “spend down” the cash funds collected from over 25 years of student loan contract buyouts. In addition, cash funds were moved from the Merck Settlement to the Rural Health Professional Incentive Fund to be used for student loans and the state match for loan repayment. This cash transfer occurred in FY 2008-09, but the cash spending authority was limited to \$250,000 per year for each of the next 4 fiscal years (FY 2008-09 through FY 2011-12). Cash spending authority was granted to spend these additional cash funds and for the local match funds needed for loan repayment.

Beginning in FY 2013-14, the Legislature moved \$1.5M from the Health and Human Services Cash Fund to the Rural Health Professional Incentive Fund. The Rural Health Advisory Commission may use up to \$500,000 per year for the state match for loan repayment and/or student loans. Cash spending authority was granted for this \$500,000 in state cash funds plus \$500,000 for local match funds for loan repayment.

9. Specified Tax Source: None

10. Contract with private providers for services: No (see #14)

Providers: 87 health professionals (as of 1st Quarter FY 2013-14)

\$ contracted \$1,955,184 as of September 1, 2013 (several contracts are still in process of being signed)

Clients served: population impacted over 700,000

11. Grant awarded by program: None

12. Mandated services

State: Yes

Statute citation: §71-5650 to §71-5670

Federal: No

13. Evidence-based performance assessment process in place by program

The Rural Health Advisory Commission (RHAC) is a statutory commission appointed by the Governor. One of the RHAC’s statutory duties is to select

recipients of financial incentives available under the act. The RHAC submits an annual report to the Department, Legislature, and the Governor on the rural health incentive programs and rural health policy recommendations. (See #14 for additional details)

14. Additional information:

From item #3: There are 1.5 FTEs (state employees) that manage the daily work of the Rural Health Advisory Commission (RHAC) and the 2 rural incentive programs (Nebraska Rural Health Student Loan Program and Nebraska Loan Repayment Program). Daily oversight is the Nebraska Office of Rural Health.

From #5: The Nebraska Rural Health Student Loan Program (175/920/005) and Nebraska Loan Repayment Program (175/920/055) are subprograms of Program 175 budget line. It is the RHAC that determines how the funds appropriated for Program 175 will be allocated between student loans and loan repayment

From item #10: The Nebraska Loan Repayment Program is not a “contract for services”; it is a state-aid incentive program to assist rural and underserved areas in recruiting and retaining health care professionals. (§71-5666 and §71-5668)

From item #13: The Rural Health Advisory Commission’s Annual Report of the Rural Health Systems and Professional Incentive Act was completed and distributed in December 2012. The Rural Health Advisory Commission’s Annual Rural Health Recommendations report was completed and distributed in March 2013.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 9, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history:
Nebraska Rural Health Student Loan Program – Aid (Accounting code 175/920/005)
The Nebraska Rural Health Student Loan Program offers “student loans” to medical, dental, physician assistant and graduate-level mental health students who are residents of Nebraska and enrolled or accepted for enrollment in graduate schools in Nebraska. These are forgivable student loans if the recipient practices in a state-designated shortage area the equivalent of full-time for one year for each year he/she receives a student loan.
2. Program manager, phone number: Marlene Janssen, 471-0778
3. Number of State Employees: (see #14)
Staff support is provided through State Incentive Match Program - Accounting code 179/480/025
4. Number of clients served by program:
Thirty-three (33) student loan recipients are currently in training. There are 16 student loan recipients currently in practice under obligation receiving forgiveness of their student loans. The population impacted by this public health program and the student loan recipients currently in practice under obligation is approximately 270,000.
5. Total Program 175 Spent Amount: \$2,136,448
Total Student Loan Subprogram Amount: \$537,969 (See note under #14)
6. Federal Funds: None
7. State General Funds: None (See #14 for details)
8. State Cash Funds: Yes
\$537,969
100% of the budget
Since FY2007-08, the Legislature has required the Rural Health Advisory Commission (RHAC) to spend down the cash funds collected over the past 25

years from *student loan* contract buyouts. This action by the Legislature decreased the general fund appropriation and increased the cash spending authority by \$300,000. The Rural Health Professional Incentive Fund (§71-5661) is not a revolving cash account. Once these funds are gone, they cannot be replenished unless a student loan recipient defaults and buys out his/her contract. The Rural Health Advisory Commission has used the increased cash spending authority to fund student loans and for some of the state match for loan repayment using the student loan cash.

Beginning in FY 2013-14, the Legislature moved \$1.5M from the Health and Human Services Cash Fund to the Rural Health Professional Incentive Fund. These funds were put in the subprogram 005 (student loan) cash fund. The Rural Health Advisory Commission may use up to \$500,000 per year for the state match for loan repayment and/or student loans. Cash spending authority was granted for this \$500,000 in state cash funds plus \$500,000 for local match funds for loan repayment.

9. Specified Tax Source: None

10. Contract with private providers for services: Student loan agreements (See #14 for explanation)
 - # Providers: There are 33 student loan recipients.
 - \$ contracted: \$250,000
 - # Clients served: Population impacted by student loan recipients currently under obligation is approximately 270,000

11. Grant awarded by program: None

12. Mandated services
 - State: Yes, Statute citation: §71-5650 to §71-5670
 - Federal: No

13. Evidence-based performance assessment process in place by program
 - The Rural Health Advisory Commission (RHAC) is a statutory commission appointed by the Governor. One of the RHAC's statutory duties is to select recipients of financial incentives available under the act. The RHAC submits an annual report to the Department, Legislature, and the Governor on the rural health incentive programs and rural policy recommendations. (See #14 for additional details)

14. Additional information:

From item #3: There are 1.5 FTEs (state employees) that manage the daily work of the Rural Health Advisory Commission (RHAC) and the 2 rural incentive programs (Nebraska Rural Health Student Loan Program and Nebraska Loan Repayment Program). Daily oversight is the Nebraska Office of Rural Health.

It is the RHAC that determines how the funds appropriated for the Rural Health Systems and Professional Incentive Act are allocated each year to the two incentive programs (student loan and loan repayment programs). In FY2004-05, when graduate-level mental health students were added to the Nebraska Student Loan Program, the Legislature granted an addition \$240,000 in cash spending authority to pay for the mental health student loans and use the cash funds collected from student loan contract buyouts over the previous 20 years. Beginning in FY2007-08, the Legislature decreased the general funds for the rural incentive programs and increased cash spending authority by \$300,000 per year to spend down the Rural Health Professional Incentive Fund cash balance. As previously stated, once these funds are gone they cannot be replenished unless a student loan recipient defaults and buys out his/her contract. In FY10-11, \$300,000 was restored to the general funds and cash spending authority was reduced by an equal amount. As of September 1, 2013, the subprogram 005 (student loan) cash balance *minus the Health and Human Services cash transfer of \$1.5M in July 2013* is \$221,000.

From item #10: The Nebraska Student Loan Program is not a “contract for services,” it is a state-aid incentive program to assist rural and underserved areas in recruiting and retaining health care professionals. (§71-5666 and §71-5668)

From item #13: The Rural Health Advisory Commission’s 2012 Annual Report of the Rural Health Systems and Professional Incentive Act was completed and distributed in December 2012. The Rural Health Advisory Commission’s Annual Rural Health Recommendations report was completed and distributed in March 2013.

The Rural Health Advisory Commission budgets approximately \$250,000 per year for student loans from the Program 175 budget. All student loan payments are made from the cash fund at this time.

The rural incentive programs (student loan and loan repayment) impact approximately two-thirds of the population in Nebraska. While these are “rural” programs, underserved populations at Federally Qualified Community Health

Centers (FQHC) also benefit from these program because professionals hired by FQHCs are also eligible for our programs.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Local Health Department Prevention, Accounting code 502/930/032
Provide funds to local public health departments to provide services for people within their jurisdictions.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: None, oversight provided by employees funded by the Office of Community and Rural Health (accounting code 179/480/101)
4. Number of clients served by program: 18 local public health departments and their constituents in 86 counties
5. Total Amount: \$900,000
6. Federal Funds: None
7. State General Funds: Yes
\$900,000
100% of paid
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: No, see item 14 below
11. Grant awarded by program: No
12. Mandated services
State: Yes, Statute citation: Appropriations Bill
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Every local health department that receives funds prepares an annual report that describes how well their department performs the ten essential services that are described in the legislation.

14. Additional information: Funds are passed through from DHHS to the 18 local health departments; there are no contracts.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Public Health Centers, Accounting code 502/930/030
Provide funds to local public health departments to provide health surveillance and epidemiology for people within their jurisdictions.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: None, oversight provided by employees funded by the Office of Community and Rural Health (accounting code 179/480/101)
4. Number of clients served by program: 18 local public health departments and their constituents in 86 counties
5. Total Amount: \$1,898,246
6. Federal Funds: None
7. State General Funds: Yes
\$1,898,246
100% of paid amount
8. State Cash Funds: None
9. Specified Tax Source: None
10. Contract with private providers for services: No, see item 14 below
11. Grant awarded by program: No
12. Mandated services
State: Yes, Statute citation: Appropriations Bill
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Every local health department that receives funds prepares an annual report that describes how well their department performs the ten essential services that are described in the legislation.

14. Additional information: Funds are passed through from DHHS to the 18 local health departments; there are no contracts.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Public Health Infrastructure and Per Capita Aid, Accounting codes 502/930/027 and 502/930/028.
Provide funds to local public health departments to provide assessment, assurance, and policy development regarding the ten essential public health services for people within their jurisdictions.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: None, oversight provided by employees funded by the Office of Community & Rural Health (accounting code 179/480/101)
4. Number of clients served by program: 18 local public health departments and their constituents in 86 counties
5. Total Amount: \$5,405,000
6. Federal Funds: None
7. State General Funds: None
8. State Cash Funds: Yes
\$5,405,000
100% of paid amount
9. Specified Tax Source: None
10. Contract with private providers for services: No, see item 14 below
11. Grant awarded by program: No
12. Mandated services
State: Yes, Statute citation: 71-1628.08 and Appropriation's Bill
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Every local health department that receives funds must prepare an annual report that describes how well their department performs the ten essential services that are described in the legislation.

14. Additional information: Funds are passed through from DHHS to the 18 local health departments; there are no contracts.

**DHHS Program Data and Information Form
Community and Rural Health Planning Unit**

Date: September 11, 2014

Prepared by: Sue Medinger

Contact Number: 471-0191

1. Program name, mission, description, history
Stem Cell Research Grants, Accounting code 621/970/001
Grants to Nebraska institutions or researchers for the purpose of conducting non-embryonic stem cell research.
2. Program manager, phone number: Sue Medinger, 471-0191
3. Number of State Employees: none
4. Number of clients served by program: All Nebraska citizens
5. Total Budget Amount: \$447,654
6. Federal Funds: None
7. State General Funds: None
8. State Cash Funds: Yes
\$447,654
100% of the budget
9. Specified Tax Source: None
10. Contract with private providers for services: No
11. Grant awarded by program: Yes
Grantees: 4
\$ Grants: \$439,824
Clients served: All Nebraska citizens
12. Mandated services
State: Yes, Statute citation: State Statute 71-8801 to 71-8806
Federal: No

13. Evidence-based performance assessment process in place by program: Yes
Grantees are required to submit semi-annual progress reports and a final report.

14. Additional information: None

Table of Contents
Public Health Preparedness and Emergency Response Unit

Hospital Preparedness Program (Program 262).....1
Public Health Emergency Preparedness (Program 262).....3

DHHS Program Data and Information Form
Public Health Preparedness and Emergency Response Unit

Date: September 9, 2014

Prepared by: Chris Newlon

Contact Number: 402-471-0191

1. Program name, mission, description, history

Hospital Preparedness Program (Accounting code: 262/570/022)

Funds directed to health care coalition planning groups (through local public health departments and city governments), health care providers, Tribes and Federally Qualified Health Centers, University System (UNL and UNMC) to develop plans and identify their roles and responsibilities in public health emergencies, including prevention, response and recovery. Funding began in 2002. The federal funding agency is Department of Health and Human Services, Office of Assistant Secretary for Preparedness and Response.

2. Program manager, phone number: Eric Sergeant, 402-471-1991

3. # of State Employees: 1.8

4. # of clients served by program - Benefits entire state population through approximately 100 participating hospitals including the VA and hospital labs; 7 regional medical response coalitions; provides licensed health care professionals' education including health law, fire, Emergency Medical Services, lab, 20 local health departments, 4 Tribes, and 6 Federally Qualified Health Centers.

5. Total Budget Amount: \$1,372,877

6. Federal Funds: Yes
\$1,372,877; 100% of budget

7. State General Funds: No

8. State Cash Funds: No

9. Specified Tax Source: No

10. Contract with private providers: Yes

Local health departments, service agencies, hospitals, Federal Qualified Health Centers, Tribes, the University system, emergency response providers, for services.

Providers: 30

\$ contracted: \$1,125,000

Clients served: Entire state benefits

11. Grant awarded by program: No

12. Mandated services

State: No

Federal: Uncertain: There is a Presidential Authorization which mandates funding for the preparedness and response programs and federal program requirements for the grants. The federal government requires certain activities to be done, certain assurances and sites levels of performance to be met. However, there are not specific “services” that must be provided to a client. There are no regulations specific to preparedness activities.

13. Evidence-based performance assessment process in place by program: Yes

All contracts and sub-grants have identified activities and deliverables (reports on activities and documents/documentation that must be met in order to receive payment/funds)

14. Additional information:

The sub-grants are with local health departments, local government, and the University. Approximately 15% is retained for administration of the program and 85% is sub-granted to local health departments, the University System, Tribes and Federally Qualified Health Centers.

DHHS Program Data and Information Form
Public Health Preparedness and Emergency Response Unit

Date: September 9, 2014

Prepared by: Chris Newlon

Contact # 402-471-1991

1. Program name, mission, description, history

Public Health Emergency Preparedness, Accounting code: **262/570/114**

Funds directed to state and local health departments and other public health response partners to develop plans and identify their roles and responsibilities in public health emergencies, including receipt, distribution and administration of treatment drugs and vaccines; disease surveillance and control measures, public and professional education regarding disease, transmission, prevention, vaccination, laboratory surveillance and testing, emergency communications, emergency response administration. Supplies and equipment can be purchased if needed. Funding began in 2002 from the Centers for Disease Control.

2. Program manager, phone number: Christine Newlon, 402-471-1991

3. Number of State Employees: 5.95

4. Number of clients served by program: Benefits entire state population through 20 local health departments; University System (UNL and UNMC); licensed health care responders' education including health law, fire, Emergency Medical Services; public Health lab testing. Benefits 4 Tribes, 6 Federally Qualified Health Centers.

5. Total Budget Amount: \$5,045,711

6. Federal Funds: Yes
\$5,045,711
100% of budget

7. State General Funds: No

8. State Cash Funds: No

9. Specified Tax Source : No

10. Contract with private providers: Yes, local health departments, service agencies, hospitals, Federal Qualified Health Centers, Tribes, the University System, emergency response providers, for services
Providers: 50
\$ contracted: \$4,336,256

Clients served: Entire state of NE is served

11. Grant awarded by program: No

12. Mandated services

State: No

Federal: Uncertain: There is a Presidential Authorization which mandates funding for the preparedness and response programs and federal program requirements for the grants. The federal government requires certain activities to be done, certain assurances and sites levels of performance to be met. However, there are not specific “services” that must be provided to a client. There are no regulations specific to preparedness activities.

13. Evidence-based performance assessment process in place by program: Yes

All contracts and sub-grants have identified activities and deliverables (reports on activities and documents/documentation that must be met in order to receive payment/funds).

14. Additional information:

Approximately 85% of the funds are awarded through sub-grants and a few contracts.

The vast majority of sub-grants (84%) are with local health departments and the University System (UNL and UNMC). There are a few small contracts (totaling approximately \$50,000) with emergency response organizations, hospitals and private companies.

Table of Contents
Environmental Health Unit

| | |
|--|----|
| Adult Blood Lead Epidemiological Surveillance Program | 1 |
| Asbestos Control Program | 3 |
| Childhood Lead Poison Prevention Program | 5 |
| Clean Indoor Air Program | 7 |
| Day Care Facilities/Senior Centers | 9 |
| Environmental Risk Assessment | 11 |
| Food Inspections by MOU with Department of Agriculture | 13 |
| High Level Radioactive Waste Program | 15 |
| Laboratory Administration & Customer Service | 17 |
| Laboratory Bacteriological Water Testing | 19 |
| Laboratory Biosafety Testing | 21 |
| Laboratory Blood Alcohol Testing | 23 |
| Laboratory Inorganic Chemistry Testing | 25 |
| Laboratory Metal & Air PM2.5 Testing | 27 |
| Laboratory Organic Chemistry Testing | 29 |
| Laboratory Radiological Chemistry Testing | 31 |
| Lead-Based Paint Program | 33 |
| Low Level Radioactive Waste Program | 35 |
| Mercury Program | 37 |
| Methamphetamine Program | 39 |
| Mobile Home Parks | 41 |
| Mobile Home Parks Engineering | 43 |
| Mold Program | 45 |
| Public Drinking Water Engineering | 47 |
| Public Drinking Water Field Inspections | 49 |
| Public Drinking Water Monitoring & Compliance | 51 |
| Public Drinking Water Operator Training | 53 |
| Public Swimming Pools Engineering | 55 |
| Public Swimming Pools Licensing and Inspection | 57 |
| Public Water System Capacity Development | 59 |
| Public Water System Water Security | 61 |
| Radioactive Materials Program | 63 |
| Radiological Emergency Response Program | 65 |
| Radon Program | 67 |
| Recreational Camps | 69 |
| School Food Facilities Inspections | 71 |
| Water & Sewage Evaluation for Loan Purposes | 73 |
| Well Driller/Pump Installer Program | 75 |
| X-Ray Program | 77 |

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Doug Gillespie

Contact #: 471-0548

1. Program name, mission, description, history

Adult Blood Lead Epidemiological Surveillance Program

To maintain a database that provides surveillance information of adult exposure to lead; and provide outreach assistance.

The program monitors and evaluates blood lead levels on adults, maintains a database to report to the Centers for Disease Control and Prevention, and provides outreach.

The program began in 1998.

2. Program manager: Doug Gillespie Phone number: 471-0548
3. # of State Employees: .25 FTE (performed by SOS Employee)
4. # of clients served by program: Approximately 1,200 individuals reported and monitored annually.
5. Total Budget Amount: \$0
6. Federal Funds: No
\$0
% of budget: N/A
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: No

Federal yes no

13. Evidence-based performance assessment process in place by program: Yes

Describe: Blood test data is entered and maintained in database. Outreach is provided to individuals with elevated blood lead levels.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Doug Gillespie

Contact #: 471-0548

1. Program name, mission, description, history:

Asbestos Control Program

To protect the citizens of the state from exposure to asbestos through the enforcement of the Asbestos Control Program Regulations.

The program accredits training providers, licenses businesses, approves project notifications and enforces the regulations through on-site inspections and audits.

The program began in 1988

2. Program manager: Doug Gillespie Phone number: 471-0548
3. # of State Employees: 2 FTE's
4. # of clients served by program: 26 Businesses, 6 Training Providers, 828 licensees
5. Total Budget Amount: \$218,000
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$218,000
% of budget 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-6301 - 17
Federal: Yes
Oversight agency: Environmental Protection Agency
Regulation citation: 40 CFR Part 763

13. Evidence-based performance assessment process in place by program: Yes

Describe: Audit training providers, inspect business records, and inspect projects.
Enforcement actions are initiated upon violations of the regulations and act.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Doug Gillespie

Contact #: 471-0548

1. Program name, mission, description, history

Childhood Lead Poison Prevention Program

To maintain a database that provides surveillance information of children's exposure to lead; and provide outreach assistance.

The program monitors and evaluates blood lead levels on children, maintains a database, provide outreach to families and provide case management to families with children with elevated blood lead levels.

The program began in 1998.

2. Program manager: Doug Gillespie Phone number: 471-0548
3. # of State Employees: .25 FTE (performed by SOS Employee)
4. # of clients served by program: Approximately 12,400 children reported and monitored annually.
5. Total Budget Amount: \$0
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: Yes

Federal _____yes __XX__no

Oversight agency: _____

Regulation citation: Neb. Rev. Stat. §71-2518

13. Evidence-based performance assessment process in place by program: Yes

Describe: Blood test data is entered and maintained in database. Outreach is provided to individuals with elevated blood lead levels.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jeremy Poell

Contact #: 471-8320

1. Program name, mission, description, history

Clean Indoor Air Program

To protect the citizens of the state from exposure to cigarette smoke through the implementation of the Nebraska Clean Indoor Air Act.

The program provides compliance and enforcement assistance.

The program began in 2003, with the current legislation enacted in 2009.

2. Program manager: Jeremy Poell Phone number: 471-8320
3. # of State Employees: .10 FTE
4. # of clients served by program: Citizens of the state
5. Total Budget Amount: \$25,000
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$25,000
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: Yes, with local health departments
Providers: 14
\$ contracted: \$56,000
Clients served: Citizens of the state
11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: 71-5716 through 71-5734

Federal No

13. Evidence-based performance assessment process in place by program: Yes

Describe: Compliance and enforcement assistance is aided by contracting with 14 local health departments. All complaints and enforcement actions are documented and tracked to determine the level of compliance.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Day Care Facilities/Senior Centers

Program Mission: Ensure that children utilizing Nebraska's 715 licensed day care facilities are in an environment that is safe and sanitary.

Program Description: Sanitation inspections performed to support other licensing functions of DHHS. Activity performed by referral.

Program History: Pre-1968

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1
4. # of clients served by program: To ensure that all individuals utilizing these 705 state licensed facilities find safe and sanitary conditions.
5. Total Budget Amount: \$68,075
6. Federal Funds: No
7. State General Funds: Yes
\$68,075
% of budget: 100%
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: Yes

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: Environmental Health staff of the Office of Drinking Water and Environmental Health conduct field inspections of licensed day cares/senior centers at the request of DHHS Children's Services Agencies, Facilities and Programs. The inspections evaluate the safety and sanitary conditions of the facility and the inspection report findings are forwarded to Children's Services. Performance assessment of the program is the responsibility of Children's Services.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena

Contact #: 471-0928

1. Program name, mission, description, history

Environmental Risk Assessment

This program provides health, environmental and ecological risk assessments to determine the health effects of toxicological hazards in the environment.

The program has been in existence since at least 1986.

2. Program manager, phone number: Sue Semerena - 471-0928
3. # of State Employees: 0.9 FTE
4. # of clients served by program:
By providing services to our agency and other agencies we provide risk assessment services to all Nebraskans.
5. Total Budget Amount: \$86,211
6. Federal Funds: No
7. State General Funds: Yes
\$50,002
% of budget: 58%
8. State Cash Funds: Yes
\$36,209
% of budget: 42%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: No
Describe:
14. Additional information:
Risk Assessments are required as part of every evaluation of superfund sites. The risk assessment program performs those upon request.

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Food Inspections by MOU with Department of Agriculture

Program Mission: To ensure that food served in these regulated facilities is from a safe source, stored properly, prepared properly and served in an approved manner.

Program Description: To avoid duplication of inspection of facilities regulated by both DHHS and DOA and to inspect these facilities for compliance with the Nebraska Pure Food Act.

Program History: MOU initiated in early to mid-1970s

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: .80
4. # of clients served by program: To ensure that Nebraskans eating at the facilities inspected (mainly higher education facilities) receive a safe meal.
5. Total Budget Amount: \$57,946
6. Federal Funds: No
7. State General Funds: Yes
\$57,946
% of budget: 100%
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No

11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 81-2239 to 81-2292
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe: Inspection reports are forwarded to the NDOA for performance assessment purposes.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Julia Schmitt

Contact #: 471-0928

1. Program name, mission, description, history

High Level Radioactive Waste Program

Mission: Ensure that costs incurred by the State of Nebraska attributable to the shipment of high-level radioactive waste and transuranic waste in or through the state are borne by the shipper

Description: Administer the Radiation Transportation Emergency Response Cash Fund. Fund covers (1) inspections, escorts, and security for waste shipment, planning, and maintenance, (2) coordination of emergency response capability, (3) education and training, (4) purchase of necessary equipment, and (5) administrative costs attributable to the state agencies (Department of Roads, State Patrol, Health and Human Services, Emergency Management Agency and the Public Service Commission) which are incurred as related to the shipping of high-level radioactive waste and transuranic waste

History: Laws 2003, LB 165

2. Program manager, phone number: Julia Schmitt - 471-0528
3. # of State Employees: .02
4. # of clients served by program: These activities protect all Nebraskans
5. Total Budget Amount: \$2,981
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$2,981
% of budget: 100%
9. Specified Tax Source: No

10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 71-3523-3528
Federal: No
13. Evidence-based performance assessment process in place by program: No
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Administration & Customer Service

Description: Provide certified water testing on various types of water for public water systems, private well owners, and other state, county and local agencies. We provide blood alcohol testing for law enforcement agencies across the state and particulate matter 2.5 air testing for the Nebraska Department of Environmental Quality upon request. We also manage the Nebraska Drinking Water Laboratory certification program and run a BSL III Select Agent program.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 5.75 FTE's (2 are contract employees, 1 SOS)
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, other state, county and local agencies that need water analyses, law enforcement agencies that need legal blood alcohol services, and drinking water laboratories located anywhere in United States who wish to be certified to perform drinking water testing for Nebraska.
5. Total Budget Amount: \$714,387
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$714,387
% of budget: 100%
9. Specified Tax Source: No

10. Contract with private providers for services: Yes
Providers: 1
\$ contracted: \$124,075
Clients served: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, other state, county and local agencies that need water analyses, law enforcement agencies that need legal blood alcohol services, and drinking water laboratories located anywhere in United States that wish to be certified to perform drinking water testing for Nebraska.
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620
Federal: Yes
Oversight agency: EPA
Regulation citation: 40 CFR141, 142 & 143
13. Evidence-based performance assessment process in place by program: yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Mary Boden

Contact #: 471-8441

1. Program name, mission, description, history

Laboratory Bacteriological Water Testing

Description: Provide certified bacteriological water testing on various water sample types for public water systems, private well owners and surface water samples.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 1 FTE
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all citizens that want water analyses, other state agencies that need water analyses.
5. Total Budget Amount: \$180,873
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$180,873
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: 1
\$ contracted: See Lab Administration & Customer Service
Clients served: The laboratory serves all public water systems in Nebraska, all citizens that want water analyses, other state agencies that need water analyses
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620.
Federal: Yes
Oversight agency: EPA
Regulation citation: 40 CFR141, 142 & 143

13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.

14. Additional Information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Biosafety Testing

Description: Provide a certified Biosafety level III laboratory for testing a variety of environmental water samples for public water systems, private well owners and state, county and local agencies. Also provide backup facilities and staff for the state clinical BSLIII lab located at UNMC in Omaha.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: .25 FTE (Contracted employee)
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that may need related water analyses, and other state, county and local agencies that need related water analyses.
5. Total Budget Amount: \$6,630
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
9. Specified Tax Source: No
10. Contract with private providers for services: Yes (see above)
11. Grant awarded by program: No
12. Mandated services
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by the CDC Select Agent Program.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Blood Alcohol Testing

Description: Provide legal and defensible blood alcohol testing upon request for a variety of law enforcement agencies in counties located across the state of Nebraska.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 1.25 FTE
4. # of clients served by program: All law enforcement agencies located in Nebraska that need legal blood alcohol analyses.
5. Total Budget Amount: \$175,445
6. Federal Funds: No
7. State General Funds: No
% of budget:
8. State Cash Funds: Yes
\$175,445
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: 1
\$ contracted: See Lab Administration & Customer Service
Clients served: All law enforcement agencies located in Nebraska that need legal blood alcohol analyses
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program.

14. Additional information:

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Sue Semerena

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Inorganic Chemistry Testing

Description: Provide certified water inorganic chemistry testing on various water types, for public water systems, private well owners and other state, county, and local agencies. Help maintain drinking water primacy for the State of Nebraska.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 3 FTE
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses.
5. Total Budget Amount: \$289,127
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$289,127
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
Providers: 1
\$ contracted: See Lab Administration & Customer Service
Clients served: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses.
11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620.

Federal: Yes

Oversight agency: EPA

Regulation citation: 40 CFR141, 142 & 143

13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.

14. Additional information:

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Metal & Air PM2.5 Testing

Description: Provide certified metal testing on various water samples for public water systems, private well owners and other state, county and local agencies. Also provide certified PM 2.5 particulate air testing for the Nebraska Department of Environmental Quality. Help maintain drinking water primacy for the State of Nebraska.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 2 FTE
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses and/or PM 2.5 air testing.
5. Total Budget Amount: \$197,912
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$197,912
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: yes
Providers: 1
\$ contracted: See Lab Administration & Customer Service
Clients served: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses and/or PM 2.5 air testing.

11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620.
Federal: Yes
Oversight agency: EPA
Regulation citation: 40 CFR141, 142 & 143
13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Organic Chemistry Testing

Description: Provide certified organic chemistry testing on various water sample types, for public water systems, private well owners, and other state, county, and local agencies. Help maintain drinking water primacy for the State of Nebraska.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 3.65 FTE
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses.
5. Total Budget Amount: \$475,260
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$475,260
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: 1
\$ contracted: See Lab Administration & Customer Service
Clients served: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state, county and local agencies that need water analyses.
11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620.

Federal: Yes

Oversight agency: EPA

Regulation citation: 40 CFR141, 142 & 143

13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Mary Boden

Contact #: 471-0928

1. Program name, mission, description, history

Laboratory Radiological Chemistry Testing

Description: Provide certified radiological chemistry testing for public water systems, private well owners and surface water samples.

2. Program manager, phone number: Mary Boden – 471-8441
3. # of State Employees: 0.10 FTE
4. # of clients served by program: The laboratory serves all public water systems in Nebraska, all private citizens that want water analyses, and other state agencies that need water analyses.
5. Total Budget Amount: \$9,916
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$9,916
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: Title 179 NAC 20, Neb.Rev.Stat. Sections 71-5303, 71-5306, 71-2619, and 71-2620
Federal: Yes
Oversight agency: EPA

Regulation citation: 40 CFR141, 142 & 143

13. Evidence-based performance assessment process in place by program: Yes

Describe: The laboratory runs a required quality assurance program that is reviewed every three years by Region 7 EPA during an on-site audit of the program.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Doug Gillespie

Contact #: 471-0548

1. Program name, mission, description, history

Lead-Based Paint Program

To protect the citizens of the state from exposure to lead-based paint through the enforcement of the Residential Lead-Based Paint Professions Certification Act.

The program accredits training providers, licenses businesses, approves project notifications and enforces the regulations through on-site inspections and audits.

The program began in 2001.

2. Program manager: Doug Gillespie Phone number: 471-0548
3. # of State Employees: 3 FTE's
4. # of clients served by program: 47 Businesses, 3 Training Providers, 157 licensees
5. Total Budget Amount: \$225,000
6. Federal Funds: Yes
\$215,000
% of budget: 95%
7. State General Funds: No
8. State Cash Funds: Yes
\$10,000
% of budget: 5%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-6318 - 32
Federal: Yes
Oversight agency: Environmental Protection Agency
Regulation citation: 40 CFR Subpart L Title X
13. Evidence-based performance assessment process in place by program: Yes

Describe: Audit training providers, inspect business records, and inspect projects.
Enforcement actions are initiated upon violations of the regulations and act.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena/Julia Schmitt

Contact #: 471-0928

1. Program name, mission, description, history

Low Level Radioactive Waste Program

Mission: License the operation of a low level radioactive waste disposal facility

Description: License the operation of a low level radioactive waste disposal facility

History: 71-3501 – 71-3520 and 81-1578 – 81-15,116

No current activities.

2. Program manager, phone number: Julia Schmitt 471-0528
3. # of State Employees: 0
4. # of clients served by program: 0
5. Total Budget Amount: 0
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 71-3501 - 71-3520 and 81-1578 – 81-15116
Federal: Yes
Oversight agency: Nuclear Regulatory Commission
Regulation citation: Atomic Energy Act of 1954, as Amended, Section 274

13. Evidence-based performance assessment process in place by program: No
14. Additional information: No current activities.

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Jeremy Poell

Contact #: 471-8320

1. Program name, mission, description, history

Mercury Program

Provide Nebraskans with information about health effects from exposure to mercury, mercury spill cleanup, and disposal of mercury-containing items.

The program provides outreach assistance via operation of the Mercury Call Line, as well as some assistance with collection events.

The program began in 1998.

2. Program manager: Jeremy Poell Phone number: 471-8320
3. # of State Employees: .25 FTE
4. # of clients served by program: Citizens of the state.
5. Total Budget Amount: \$9,450
6. Federal Funds: Yes, via a Memorandum of Agreement with NDEQ
% of budget: 100%
7. State General Funds: No
8. State Cash Funds:
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: No

Federal No
Oversight agency: _____
Regulation citation:

13. Evidence-based performance assessment process in place by program: Yes

Describe: All calls to Mercury Call Line are documented and tracked, as well as number of spill situations that have occurred. This allows the program to monitor trends in mercury exposure situations, and to determine whether collection events and/or outreach efforts have an impact. In addition, when conducting collection events, the actual amount of material collected is a direct measure of what is being removed from homes. Past grant activities have allowed for the recycling of over 170 lbs. of mercury to be removed from indoor environments.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Sue Semerena

Contact #: 471-0928

1. Program name, mission, description, history

Methamphetamine Program

This program provides technical assistance to local health departments and citizens on how to identify and clean up clandestine methamphetamine houses. The program also maintains the regulations found at Title 178 NAC 24 Methamphetamine Cleanup.

The program has been in existence since the passage of LB 915 in 2006

2. Program manager, phone number: Sue Semerena - 471-0928
3. # of State Employees: 0.10 FTE
4. # of clients served by program:
Local Health Departments and any Nebraskan needing technical assistance
5. Total Budget Amount: \$ 0
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: 71-2432 to 71-2435

Federal: No

13. Evidence-based performance assessment process in place by program: No

Describe:

14. Additional information:

Cost of this program is absorbed by other programs.

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Mobile Home Parks

Program Mission: To ensure that Nebraska's licensed mobile home parks provide a safe and sanitary environment in which to live and raise a family.

Program Description: To license and inspect mobile home parks to assure compliance with Title 178 NAC 5.

Program History: 1976 – LB91

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1.5
4. # of clients served by program: To ensure that Nebraskans living in Nebraska's licensed 339 mobile home parks have a safe and sanitary place to live and raise their family.
5. Total Budget Amount: \$97,374
6. Federal Funds: No
7. State General Funds: Yes
\$ 97,374
% of budget: 100%
8. State Cash Funds: No
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-4621 to 71-4634
Federal: No

13. Evidence-based performance assessment process in place by program Yes

Describe: In addition to monitoring the mobile home park complaints received, follow-up on corrective actions resulting from field inspections and monitoring the overall effectiveness of the program.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Mobile Home Parks Engineering

Program Mission: To ensure that the design standards for mobile home parks is adequate to assure that Nebraska's 370 licensed mobile home parks provide a safe place to live and raise a family.

Program Description: To review engineering plans and specifications for compliance with Title 178 NAC 5.

Program History: 1976 – LB91

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: .25
4. # of clients served by program: This program serves all Nebraskans living in Nebraska's 339 licensed mobile home parks.
5. Total Budget Amount: \$19,053
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$19,053
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-4621 to 71-4634
Federal: No

- 13 Evidence-based performance assessment process in place by program: Yes

Describe: Evaluate complaints received and field inspection report findings to determine if the mobile home park design criteria needs to be revised.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jeremy Poell

Contact #: 471-8320

1. Program name, mission, description, history

Mold Program

Provide the citizens of the state with information about mold prevention, health effects, and cleanup.

The program provides outreach assistance.

The program began in 2004.

2. Program manager: Jeremy Poell Phone number: 471-8320
3. # of State Employees: .10 FTE
4. # of clients served by program: Citizens of the state.
5. Total Budget Amount: \$0
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: No

Federal _____yes _____no

13. Evidence-based performance assessment process in place by program: Yes

Describe: All mold calls received by program are documented, which allows the program to track number, type, duration, and location of calls. Thus the program can determine resource use for this issue as well as potential needs.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Drinking Water Engineering

Program Mission: Ensure that Nebraska's 1,350 public water systems are properly designed to deliver an adequate amount of safe drinking water on an ongoing basis.

Program Description: Review plans and specifications for compliance with Title 179 NAC 2-007. Includes Drinking Water State Revolving Fund activities.

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313)

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 6.5
4. # of clients served by program: This program serves approximately 90% of the population of Nebraska utilizing 1,350 Nebraska public water systems.
5. Total Budget Amount \$749,894
6. Federal Funds: Yes
\$217,655
% of budget: 29%
7. State General Funds: Yes
\$408,294
% of budget: 54%
8. State Cash Funds: Yes
\$123,945
% of budget: 17%
9. Specified Tax Source: No

10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services:
 - State: Yes
 - Statute citation: 71-5301 to 71-5314
 - Federal: Yes
 - Oversight agency: U.S. Environmental Protection Agency
 - Regulation citation: 40 CFR Part 131, Title XIV of the Public Health Service Act (commonly known as the “Safe Drinking Water Act”) Public Law 104-182 104th Congress
13. Evidence-based performance assessment process in place by program: Yes
 - Describe:
 - State Level: Final field inspections of projects are conducted by program engineers to ensure compliance with Department approved plans and specifications.

 - Federal Level: EPA Region 7 in Kansas City KS conducts an annual review of Nebraska’s public water supply program.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Drinking Water Field Inspections

Program Mission: Ensure that Nebraska's 1,350 public water systems are maintained and operated in a manner that will deliver safe drinking water on an ongoing basis.

Program Description: Conduct field inspections of public water systems to determine compliance with Title 179

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313)

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 11.5
4. # of clients served by program: Ensure that Nebraska's 1,350 public water systems are operated and maintained in a manner consistent with Title 179, thereby assuring safe drinking water on an ongoing basis for 90% of Nebraskans.
5. Total Budget Amount \$728,523
6. Federal Funds: Yes
\$223,248
% of budget: 30%
7. State General Funds: Yes
\$46,585
% of budget: 7%
8. State Cash Funds: Yes
\$458,690
% of budget: 63%

9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services:
 - State: Yes
 - Statute citation: - 71-5301 to 71-5314
 - Federal: Yes
 - Oversight agency: U.S. Environmental Protection Agency
 - Regulation citation: 40 CFR Part 131, Title XIV of the Public Health Service Act (commonly known as the “Save Drinking Water Act”) Public Law 104-182 104th Congress
13. Evidence-based performance assessment process in place by program: Yes
 - Describe:
 - State Level:
 - Require a corrective action plan be submitted for violations found during field inspections. The corrective actions are tracked to ensure they are received.
 - Follow-up field inspections are made on 5% of the corrective actions to verify they have been corrected.
 - Evaluate the numbers and types of violations for water operator training purposes.
 - Federal Level: EPA Region 7 in Kansas City KS conducts an annual review of program records, policies and compliance to the state developed/EPA approved public water system annual workplan.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Drinking Water Monitoring & Compliance

Program Mission: Protect public health by providing safe drinking water from Nebraska's 1,350 public water systems.

Program Description: Monitor and enforce drinking water standards set forth in Title 179.

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313)

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 13.6
4. # of clients served by program: This program serves approximately 90% of the population of Nebraska utilizing 1.350 Nebraska public water systems.
5. Total Budget Amount: \$872,322
6. Federal Funds: Yes
\$309,430
% of budget: 35%
7. State General Funds: Yes
\$13,528
% of budget: 2%
8. State Cash Funds: Yes
\$549,364
% of budget: 63%
9. Specified Tax Source: No

10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services:
 - State: Yes
 - Statute citation: 71-5301 to 71-5313
 - Federal: Yes
 - Oversight agency: U.S. Environmental Protection Agency
 - Regulation citation: 40 CFR Part 131, Title XIV of the Public Health Service Act (commonly known as the “Save Drinking Water Act”) Public Law 104-182 104th Congress
13. Evidence-based performance assessment process in place by program: Yes
 - Describe:
 - State Level: Evaluation of any complaints received and performing an annual review of established program policies.

 - Federal Level: EPA Region 7 in Kansas City, KS conducts an annual review of program records, policies and compliance to the state developed/EPA approved public water system annual workplan.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Drinking Water Operator Training

Program Mission: To ensure the delivery of safe drinking water by providing training to Nebraska's 4212 public water system operators.

Program Description: Provide training and examinations for water operators so that they meet the requirements for licensure

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313), amended 1986

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1
4. # of clients served by program: Provide up-to-date training for the 4272 water operators to prepare them for examination and licensure, thereby ensuring safe drinking water on an ongoing basis for 90% of Nebraskans.
5. Total Budget Amount: \$298,321
6. Federal Funds: Yes
\$ 291,968
% of budget: 98%
7. State General Funds: Yes
\$ 3,249
% of budget: 1%
8. State Cash Funds: Yes
\$3,104
% of budget: 1%

9. Specified Tax Source: No
10. Contract with private providers for services: No
Providers: 0
\$ contracted: 0
Clients served: 0
11. Grant awarded by program: No
12. Mandated services:
State: Yes
Statute citation: 71-5301 to 71-5314
Federal: Yes
Oversight agency: U. S. Environmental Protection Agency
Regulation citation: 40 CFR Part 131, Title XIV of the Public Health Service Act (commonly known as the “Safe Drinking Water Act”) Public Law 103-183 104th Congress
13. Evidence-based performance assessment process in place by program: Yes
- Describe:
State Level:
1. Evaluate training agenda to ensure it addresses types of violations found from the routine field inspection of public water system.
2. Provide administrative oversight of the EPA water operator training grant.
Federal Level: EPA Region 7 in Kansas City, KS conducts an annual review of the Department’s administration of the EPA water operator training grant.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Swimming Pools Engineering

Program Mission: To ensure the design of swimming pools and spas are protective of public health and safety.

Program Description: To review plans and specifications for pools and spas for compliance with Title 178 NAC 4.

Program History: 1969 – LB 760

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1.45
4. # of clients served by program: This program serves all Nebraskans utilizing Nebraska's 1,278 licensed pools.
5. Total Budget Amount: \$140,810
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$140,810
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-4301 to 71-4307
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe: Analyze engineering/design/safety complaints against current pool/spa design regulations (Title 178 NAC 4) and make changes to the design regulations as deemed necessary.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Swimming Pools Licensing and Inspection

Program Mission: To ensure that users of Nebraska's 1,278 licensing swimming pools/spas have an experience that is safe and sanitary.

Program Description: License, develop/update regulations, train pool operators and inspect public swimming pools to ensure compliance with Title 178 NAC 2.

Program History: 1969 – LB760

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 2.5
4. # of clients served by program: This program is conducted to ensure that all Nebraskans utilizing the 1,278 licensed pool facilities experience a safe and sanitary pool experience.
5. Total Budget Amount: \$183,898
6. Federal Funds: No
7. State General Funds: Yes
\$183,898
% of budget: 100%
8. State Cash Funds: No
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-4301 to 74-4307
Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: Program assessment is performed by evaluating field inspection report findings in terms of number and kind of violations. This information is then transferred to the program's ongoing training of swimming pool operators.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Water System Capacity Development

Program Mission: Train the owners of Nebraska's 1,350 public water systems in the managerial, technical, and financial areas of public water system operators to ensure water system sustainability.

Program Description: To assist public water systems develop or improve infrastructure of their systems. The program offers technical assistance and on-site evaluation.

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313)

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1
4. # of clients served by program: Ensure that Nebraska's 1,350 public water systems are operated and maintained in a manner consistent with Title 179: thereby assuring safe drinking water on an ongoing basis for 90% of Nebraskans.
5. Total Budget Amount \$288,921
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$288,921
% of budget: 100%
9. Specified Tax Source: No

10. Contract with private providers for services: Yes
Providers: 2
\$ contracted: 261,742
11. Grant awarded by program: No
12. Mandated services:
State: Yes
Statute citation: 71-5301 to 71-5314
Federal: Yes
Oversight agency: U. S. Environmental Protection Agency
Regulation citation: 40 CFR Part 131, Title XIV of the Public Health Service Act (commonly known as the "Safe Drinking Water Act") Public Law 103-183 104th Congress
13. Evidence-based performance assessment process in place by program: Yes

Describe:
State: Evaluate the level of compliance of a troubled public water system after receiving capacity development training.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Public Water System Water Security

Program Mission: To assist public water systems harden the security measures at their plants, well field and other critical infrastructure for the purposes of ensuring safe drinking water.

Program Description: Administer the public water system security grant program for Nebraska's 1,350 public water systems. The program provides technical advice and on-site evaluation.

Program History: Federal Safe Drinking Water Act passed 1974 amended 1996
Nebraska Safe Drinking Water Act passed 1976 (71-5301 to 71-5313)

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1
4. # of clients served by program: Ensure that Nebraska's 1,350 public water systems are operated and maintained in a manner consistent with current recommendations for security; thereby protecting safe drinking water on an ongoing basis for 90% of Nebraskans.
5. Total Budget Amount \$160,026
6. Federal Funds: Yes
\$86,393
% of budget: 54%
7. State General Funds: Yes
\$ 33,106
% of budget: 21%

8. State Cash Funds: Yes
\$40,527
% of budget: 25%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: Yes
Grantees: unknown as not all dollars have been expended
\$ Grants 275,000
Clients served: unknown as not all dollars have been expended
12. Mandated services
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe:
State: Program makes a field inspection to ensure the new public water system security features are in place before actual cost reimbursement grant dollars are provided to the public water system.
14. Additional information:
The majority of these grant dollars are used to purchase back-up power (generators), security, lights, fencing, hard bolt doors, security cameras, etc.

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Julia Schmitt

Contact #: 471-0928

1. Program name, mission, description, history

Radioactive Materials Program

Mission: In accordance with the Radiation Control Act, regulate facilities utilizing radioactive material to protect occupational safety, public health and safety, and the environment.

Description: The Program licenses and inspects radioactive material users, including hospitals, universities, industrial facilities, and doctors. The radioactive material may be contained in a medical pharmaceutical or inside an industrial device such as a moisture density gauge or a static eliminator. The program works to ensure the safe use, possession, transfer, and disposal of radioactive materials in the State.

History: In 1963 the Nebraska Legislature enacted the Radiation Control Act (71-3501 – 71-3520) to create and administer programs to control ionizing radiation to protect the health, safety and welfare of the public.

The first regulations for "Control of Radiation" went into effect in 1966.

Nebraska became an Agreement State with the Atomic Energy Commission (now the U.S. Nuclear Regulatory Commission) in 1966. As an Agreement State, the Nuclear Regulatory Commission relinquished its authority to the State for regulation of facilities utilizing radioactive material except for on-site activities of nuclear power plants and federal facilities.

2. Program manager, phone number: Julia Schmitt 471-0528
3. # of State Employees: 4
4. # of clients served by program: 362 licenses in order to protect all Nebraskans
5. Total Budget Amount: \$474,808
6. Federal Funds: No

7. State General Funds: No
8. State Cash Funds: Yes
\$474,808
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 71-3501 – 71-3520
Federal: Yes
Oversight agency: Nuclear Regulatory Commission
Regulation citation:
Atomic Energy Act of 1954, as Amended, Section 274
13. Evidence-based performance assessment process in place by program: Yes

Describe: Facility violations are tracked and that information is used to focus inspection activities. Additionally, the Radioactive Materials Program is evaluated by the Nuclear Regulatory Commission through the Integrated Materials Performance and Evaluation Program using common performance indicators such as: Technical Staffing and Training; Status of Materials Inspection Program; Technical Quality of Inspections; Technical Quality of Licensing Actions; Technical Quality of Incident and Allegation Activities. The Radioactive Materials Program also performs self-evaluations using the same common performance indicators.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Julia Schmitt

Contact #: 471-0928

1. Program name, mission, description, history

Radiological Emergency Response Program

Mission: Protect occupational and public health and safety and the environment for the hazards of exposure to unnecessary radiation.

Description: Prepare for and respond to radiological emergencies in the State involving radioactive material or around Nebraska's two nuclear power plants. These emergencies can span a range of possibilities from an unexpected radiation release at a nuclear power plant, lost radiographic source or transportation accident involving radioactive material.

History: Laws 1963, c. 406, § 1, p. 1296

2. Program manager, phone number: Julia Schmitt 471-0528
3. # of State Employees: .75
4. # of clients served by program: These activities protect all Nebraskans
5. Total Budget Amount: \$137,943
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$137,943
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-3505 – 71-3520
Federal: Yes
Oversight agency: Nuclear Regulatory Commission and Federal Emergency Management Agency
Regulation citation: 10 CFR 50.33(g) and 50.54(s); Memorandum of Understanding between the Nuclear Regulatory Commission June 17, 1993 (58 FR 47996)

13. Evidence-based performance assessment process in place by program: Yes

Describe: Emergency preparedness and response involving the State's two nuclear power plants is evaluated by the Federal Emergency Management Agency. Staff participate in drills and exercise at each of the nuclear power stations in Nebraska. Several Nebraska state agencies, agencies from other states, federal agencies and local agencies participate in the drills/exercise. These drills/exercises help to ensure that emergency plans work effectively.

14. Additional information:

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Jeremy Poell

Contact #: 471-8320

1. Program name, mission, description, history

Radon Program

Provide services related to radon including enforcement of the Radiation Control Act and related regulations as well as conducting outreach and educational activities.

The program licenses radon mitigation and measurement businesses and enforces the regulations through on-site inspections and audits. The program also conducts activities to increase radon risk awareness such as offering small grants to local health departments, conducting a state-wide poster contest, offering radon testing in schools, running Public Service Announcements, and conducting a social media campaign as well as other media for National Radon Action Month.

The program began in 1992.

2. Program manager: Jeremy Poell Phone number: 471-8320
3. # of State Employees: 4 FTE's (includes 1 FTE SOS Employee)
4. # of clients served by program: Citizens of the State, as well as 84 licensed companies
5. Total Budget Amount: \$324,452
6. Federal Funds: Yes
\$142,513
% of budget: 44%
7. State General Funds: No
8. State Cash Funds: Yes
\$133,239 fee-based*
% of budget: 41%

*an additional \$48,700 (15% of budget) from 3rd party sources as in-kind match

9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: 2
\$ contracted: \$12,700
Clients served: current licensees requiring continuing education credits and the Citizens of the State.
11. Grant awarded by program: Yes
13 sub grants issued to local health departments to conduct local radon awareness and risk reduction programs, totaling \$37,735.
12. Mandated services
State: Yes
Statute citation: 71-3501 through 71-3520
Federal: Yes
Oversight agency: Environmental Protection Agency
Regulation citation: Indoor Radiation Abatement Act
13. Evidence-based performance assessment process in place by program: Yes

Describe: The program conducts inspections of radon mitigation system installations as well as audits of business records. The program also tracks numbers of radon measurements and mitigations in the state, and so can see trends in those activities.
14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Recreational Camps

Program Mission: To ensure that Nebraska's utilizing Nebraska's 67 licensed recreational camps experience a safe and sanitary environment.

Program Description: To license and inspect recreational camps to assure compliance with Title 178 NAC 1.

Program History: 1977 – LB39

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: .20
4. # of clients served by program: To ensure that all Nebraskans utilizing Nebraska's 60 licensed recreational camps experience a safe and sanitary environment.
5. Total Budget Amount: \$18,739
6. Federal Funds: No
7. State General Funds: Yes
\$18,739
% of budget: 100%
8. State Cash Funds: No
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 71-3101 to 71-3107
Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: In addition to monitoring any recreational camp complaints received, follow-up on corrective actions resulting from field inspections and monitor the overall effectiveness of the program.

14. Additional information:

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

School Food Facilities Inspections

Program Mission: To ensure that food consumed in Nebraska's schools is from an approved source, stored, prepared and served in a sanitary manner.

Program Description: To inspect Nebraska's schools at the request of the Nebraska Department of Education (federal mandate) for compliance with the Nebraska Food Code.

Program History: Child Nutrition WIC Reauthorization Act of 2004 which amended the Russell B. Richard National School Lunch Act

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 1.50
4. # of clients served by program: To ensure that all meals served to children eating at Nebraska's 689 schools are prepared in a safe and sanitary manner.
5. Total Budget Amount: \$104,609
6. Federal Funds: No
7. State General Funds: Yes
\$104,609
% of budget: 100%
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: No
Federal: Yes
Oversight agency: Department of Education
Regulation citation: Child Nutrition WIC Reauthorization Act of 2004 which amended the Russell B. Richard National School Lunch Act

13. Evidence-based performance assessment process in place by program: Yes

Describe: Performance assessment is the responsibility of the Nebraska Department of Education in consultation with DHHS.

14. Additional information: At the request of Department of Education, conduct the inspection of Nebraska's school food service facilities and food preparation process. The reports are forwarded to the Department of Education. Schools meeting the requirements of the Nebraska Pure Food Act are then eligible for reimbursement of the cost of the meals from the Nebraska Department of Education.

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Water & Sewage Evaluation for Loan Purposes

Program Mission: To ensure new or refinanced property owners and financial lenders that the domestic well and septic system serving the property in question meets state construction standards.

Program Description: Inspect domestic wells and septic systems at the request of financial lenders for compliance with Nebraska's well and septic construction regulations.

Program History: 1974 – MOU between DHHS, FHA, FmHA and VA
1992 – LB860 allowed DHHS to charge a fee up to \$100 to perform the inspection and write a report of findings

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: .50
4. # of clients served by program: To assure that Nebraskans purchasing property served by domestic wells and domestic septic systems live and raise their families in a safe and sanitary environment.
5. Total Budget Amount: \$34,817
6. Federal Funds: No
7. State General Funds: No
% of budget:
8. State Cash Funds: Yes
\$34,817
% of budget: 100%

9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 71-2622
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe: In most cases, performance assessment is accomplished with a follow-up inspection of the repaired domestic well and septic system.
14. Additional information:
Using the leverage of financial institutions, this program since 1974 has gone a long way in bringing domestic wells into compliance and eliminating the discharge of septic effluent in Nebraska's streams and roadside ditches. Depending on the economy and interest rate, the program will conduct 150-400 inspections per year.

**DHHS Program Data and Information Form
Environmental Health Unit**

Date: September 11, 2014

Prepared by: Jack Daniel

Contact #: 471-0510

1. Program name, mission, description, history

Well Driller/Pump Installer Program

Program Mission: Administer Nebraska's program in a manner that water well design and pump installations are conducted in a manner that protects public health and the quality of Nebraska's ground water.

Program Description: Inspect licensed well drillers and pump installers. Set water well construction standards to ensure compliance with Title 178 Chapters 10 and 12.

Program History: 1986 – LB 310

2. Program manager, phone number: Jack Daniel, 471-0510
3. # of State Employees: 5.10
4. # of clients served by program: 830 credentialed individuals for the purpose of protecting the public health of all Nebraskans and the state's ground water.
5. Total Budget Amount: \$621,920
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$621,920
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services
State: Yes
Statute citation: 46-1201 to 46-1241
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe: Program assessment is performed by evaluating field inspection report findings in terms of number and kind of violations. This information is then transferred to the program's ongoing training of well drillers and pump installers.
14. Additional information:

DHHS Program Data and Information Form Environmental Health Unit

Date: September 11, 2014

Prepared by: Julia Schmitt

Contact #: 471-0928

1. Program name, mission, description, history

X-Ray Program

Mission: Ensure that the x-ray machines in the State are used safely.

Description: Maintain a register of x-ray machines in the State and conduct inspection of the x-ray units and facilities. During these inspections, the x-ray machines are examined to ensure they are operating properly, determine if the operators of the x-ray machine are properly trained and following sound procedures, and verify that the facility is in compliance with all other regulations regarding the use of the x-ray machine. These facilities include universities, industrial plants, hospitals, dentists' and doctors' offices. Currently, medical x-rays account for the largest man-made radiation source of radiation exposure to the average citizen.

History: In 1959, the legislature passed an act which required the Governor to appoint a "coordinator of Atomic Development activities and to encourage the use of atomic energy for peaceful purposes and to prepare for the utilization of atomic energy by protecting the citizens from the effect of ionizing radiation."

In 1963 the Nebraska Legislature enacted the Radiation Control Act (71-3501 – 71-3520) to create and administer programs to control ionizing radiation to protect the health, safety and welfare of the public.

The first regulations for "Control of Radiation" went into effect in 1966 and have been revised numerous times to keep up with advances in the technical complexity of the x-ray devices.

2. Program manager, phone number: Julia Schmitt 471-0528
3. # of State Employees: 3.15
4. # of clients served by program: 1863 facilities utilizing nearly 5600 x-ray machines and 143 service companies are registered in order to protect all Nebraskans

5. Total Budget Amount: \$263,468
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$263,468
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 71-3501 – 71-3520
Federal: No
13. Evidence-based performance assessment process in place by program: Yes

Describe:
Violations are tracked and that data is used to focus inspection efforts and identify any needed regulation changes. As the technical complexity of x-ray devices advances, evaluations are performed to inform any regulatory changes.
14. Additional information:

Table of Contents
Epidemiology & Informatics Unit

Behavioral Risk Factor Surveillance System (BRFSS)1

Birth Defects Registry.....3

Brain Injury Registry5

(Nebraska) Cancer Registry7

(Nebraska) CODES (Nebraska Crash Outcome Data Evaluation System)9

(Nebraska) Emergency Medical Services (EMS) Data12

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)14

GIS Program17

Hospital & Nursing Home Utilization Statistics.....19

Injury Surveillance.....21

(Nebraska) Occupational Safety and Health Program23

Outpatient Surgical Procedures Database.....25

(Nebraska) Parkinson’s Disease Registry27

(Nebraska) Trauma Registry29

Zoonotic Disease Surveillance and Rabies Program31

Vital Statistics Cooperative Program (birth, death, fetal death)33

Syndromic Surveillance System.....36

Nebraska State Immunization Information System (NESIIS).....38

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Janis Singleton

Contact # 402-471-2180

1. Program name, mission, description, history

Behavioral Risk Factor Surveillance System (BRFSS)

The Nebraska Behavioral Risk Factor Surveillance System (BRFSS) has been conducting surveys annually since 1986 for the purpose of collecting data on the prevalence of major health risk factors among adults residing in the state. Information gathered in these studies can be used to target health education and risk reduction activities throughout the state in order to lower rates of premature death and disability.

BRFSS is a study in which a group [or groups] of individuals are composed into one large sample and studied at a single point in time. BRFSS has been conducting surveys annually since 1986 for the purpose of collecting data on the prevalence of major health risk factors among adults residing in the state. Information gathered in these studies can be used to target health education and risk reduction activities throughout the state in order to lower rates of premature death and disability. An annual report is published on the BRFSS Website.

1984 – Nebraska was one of the original 15 states that participated in the monthly data collection for CDC.

1987 – Between 1986 and 1987 Nebraska started collecting data annually. For the purpose of collecting data on the prevalence of major health risk factors. Ten years ago, the state of Nebraska was ranked in the bottom five among the fifty states in regards to the quality of data collected. According to the CDC for the last five years Nebraska has been in the top five nationally for the quality of data collected. Policies and procedures have been developed for the interviewers. In addition, the BRFSS Operations manual and the Nebraska Interviewer Training Manual were developed.

2. Program manager, phone number – Jeff Armitage 402-471-7733
3. # of State Employees: .75
4. # of clients served by program: Statewide
5. Total Budget Amount: \$700,000
6. Federal Funds: Yes (\$576,000 - % of budget 82%)
7. State General Funds: no
8. State Cash Funds Yes: \$124,000 (% of budget is 18%)

9. Specified Tax Source

Name

\$ Amount

10. Contract with private providers for services Yes

Clients served Statewide

11. Grant awarded by program No

Grantees

\$ Grants

Clients served

12. Mandated services

State

Statute citation:

Federal

Oversight agency: CDC

Regulation citation:

13. Evidence-based performance assessment process in place by program

Yes.

Describe: The CDC requires progress reports twice a year to fulfill the requirements of the grant.

14. Additional information:

None

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Mark Miller/Nila Irwin

Contact # 402-471-0147; 402-471-0355

1. Program name, mission, description, history

Birth Defects Registry

Mission/Purpose: provide for the protection and promotion of the health of the citizens of the state, the department shall have the responsibility for the implementation and development of scientific investigations and research concerning the causes, methods of prevention, treatment, and cure of birth defects.

Description: Birth Defects are reported electronically by facilities using the Vital Records electronic reporting system and are linked to the birth certificate. Most birthing facilities reporting the birth defect soon after the defect is discovered. Non-birthing facilities timeliness varies. When objection is made by either parent to furnishing information relating to the medical and health condition of a live-born child because of conflict with religion, such information shall not be required.

History: Collection of birth defects data began in 1973 to provide data for the purpose of initiating and conducting investigations of the causes, mortality, methods of prevention, treatment, and cure of birth defects and allied diseases.

2. Program manager, phone number: Nila Irwin 402/471-0354
3. # of State Employees: 1
4. # of clients served by program: statewide. All physicians, delivery hospitals, pediatric & tertiary care hospitals, and other specialty facilities.
5. Total Budget Amount \$73,000
6. Federal Funds: Yes
% of budget: 100
7. State General Funds No
% of budget

8. State Cash Funds No
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated data collection (services)
State: Yes. Birth defects and allied diseases shall be reported by
physicians, hospitals, and persons in attendance at birth in the manner and
on such forms as may be prescribed by the department.
Statute citation: Neb. Rev. Stat. §§ 71-645 to 71-648
Federal No
Oversight agency: CDC
Regulation citation: No
13. Evidence-based performance assessment process in place by program: No
Describe:
14. Additional information: None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Ashley Newmyer

Contact # 402-471-4377

1. Program name, mission, description, history

Brain Injury Registry

Mission/Purpose: To provide a central data bank of accurate, precise, and current information to assist in the statistical identification of persons with brain or head injury, planning for the treatment and rehabilitation of such persons, and the prevention of such injury.

Description: Collect monthly information from physicians, psychologists and hospitals, and rehabilitation centers which admitted and treated a person with brain or head injury. Within thirty days after receiving a report of brain or head injury, the department shall provide relevant and timely information to the person with such injury to assist such person in accessing necessary and appropriate services relating to such injury. The department shall not be required to provide information in accessing necessary and appropriate services relating to such injury if sufficient funding is unavailable.

History: Collection of brain and head injury data began in 1993 to provide data for the purpose of initiating and conducting investigations of the causes, mortality, methods of prevention, treatment, and cure of birth defects and allied diseases. In 2005, CDC funding was stopped. In 2008, state legislation required DHHS to provide relevant and timely information to the person with such injury to assist such person in accessing necessary and appropriate services relating to such injury if sufficient funding is available. Currently DHHS contracts with Assistive Technology Partnership to provide such services.

2. Program manager, phone number: Rachel Cooper 402-471-1370

of State Employees: 0.1 FTE

3. # of clients served by program: Statewide. Patients with brain or head injury, Physician and Psychologist, Hospital, and Rehabilitation Centers.

Total Budget Amount \$6,500

6. Federal Funds: Yes
% of budget: 100%
7. State General Funds No
% of budget
8. State Cash Funds No
% of budget:
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated data collection (services)
State: Yes.
1) If a person with brain or head injury is treated in this state in the office of a physician or psychologist licensed to practice in this state but is not admitted to a hospital within this state, the treating physician or psychologist shall provide a report of such injury to the department within thirty days after such treatment and identification of the person sustaining such injury.
(2) If a person with brain or head injury is admitted to or treated at a hospital or a rehabilitation center located within a hospital in this state, such hospital or rehabilitation center shall provide a report of such injury to the department within thirty days after the discharge of such person from the hospital or rehabilitation center.

Statute citation: Neb. Rev. Stat. §§ 81-653 to 81-662
Federal No
Oversight agency:
Regulation citation: Title 186 health registries and release of information
Chapter 2 Brain and head injury registry
13. Evidence-based performance assessment process in place by program: No
Describe:
14. Additional information: None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Brian Rettig

Contact # 402-471-0553

1. Program name, mission, description, history

Nebraska Cancer Registry

The Nebraska Cancer Registry (NCR) was founded in 1986, when the Nebraska Unicameral authorized funding for a state cancer registry using funds generated by the state's cigarette tax, and began collecting data on a statewide basis in 1987. The NCR gathers data on Nebraska residents diagnosed and treated for malignant and in situ tumors. The registry does not include benign tumors (except for benign brain and other nervous system tumors, which became reportable as of January 1, 2004), benign polyps, and basal cell and squamous cell carcinomas of the skin. Information gathered from each case includes the patient's name, address, birth date, race, gender, and Social Security number; date of diagnosis; primary site of the cancer; stage of disease at diagnosis; facility where the initial diagnosis was made; basis of staging; method of diagnostic confirmation; and histologic type. Follow-up information is gathered periodically on registered cases, and includes the date of last contact with the patient, status of disease, type of additional treatment, quality of survival; and, if death has occurred, the date and cause of death and the status of the cancer at the time of death. The registry collects this information from every hospital in the state, excluding facilities operated by the U.S. Department of Veterans Affairs. The registry also includes Nebraska residents who are diagnosed with and/or treated for cancer out of state, as well as cases diagnosed and/or treated at pathology laboratories, physicians' offices, and cases identified from death certificates.

The purpose of the registry is to gather data that describe how many Nebraska residents are diagnosed with cancer, what types of cancer they have, how far the disease has advanced at the time of diagnosis, what types of treatment they receive, and how long they survive after diagnosis. These data are put to a variety of uses both inside and outside of the Department of Health and Human Services (DHHS). Within the agency, they are monitored from year to year to determine trends that are developing and to see how Nebraska's cancer experience compares to the rest of the nation. They are indispensable for investigating reports of possible cancer clusters. DHHS also uses these data to help plan and evaluate its cancer control programs. Outside of DHHS, the registry has furnished information to many individuals, institutions, and organizations, including the Centers for

Disease Control, the North American Association of Central Cancer Registries, the University of Nebraska Medical Center, the National Cancer Institute, and the American Cancer Society.

2. Program manager, phone number – Michelle Hood 402-471-0147
3. # of State Employees: 2.25
4. # of clients served by program: Statewide
5. Total Budget Amount: \$516,000
6. Federal Funds Yes
 \$ 350,000
 % of budget 68%
7. State General Funds No
 \$ - N/A
 % of budget - N/A
8. State Cash Funds Yes
 \$ 166,000
 % of budget 32%
9. Specified Tax Source
 Name: 1 cent tax on cigarettes
 \$ Amount: \$ 166,000
10. Contract with private providers for services Yes
 # Clients served: Statewide
11. Grant awarded by program No
12. Mandated services
 State Yes
 Statute citation: Neb. Rev. Stat.§ 81-638
 Federal Yes
 Oversight agency: CDC
 Regulation citation: (Title 186 Health Registries and Release of Information, chapter 1 Cancer Registry)
13. Evidence-based performance assessment process in place by program
 Yes.
 Describe: the data quality of the Nebraska Cancer Registry is assessed yearly based.
14. Additional information:
 None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by Ashley Newmyer

Contact # 402-471-4377

1. Program name, mission, description, history

Nebraska CODES: The Nebraska Crash Outcome Data Evaluation System (CODES) is a multi-agency program that links and uses motor vehicle crash data and health data. CODES has been used to trace the injured occupants from the crash scene throughout the health care system and to identify the causes and outcomes resulting from motor vehicle crashes. CODES is a primary information source for highway safety and injury prevention programs. CODES will continue to provide information to serve state legislators, government agencies, research institutions, and state and local highway safety and injury prevention programs. In addition, CODES is a major component of the Nebraska Injury Surveillance System. Recent reports and factsheets include; School Crossing Zone Crash Fact Sheet 2005-2011, Nebraska Teen Driver Crashes 2007-2011, and Body region and nature of injury in crashes when seatbelts are used versus seatbelt non-use 2006-2011.

EMS Data Quality Assessment: EMS data quality and availability has been a great concern due to inconsistent data collection and reporting. Beginning in February 2007, Nebraska CODES has been conducting data quality assessments to evaluate EMS data completeness, accuracy and compliance. Subsequently, the findings of the assessment are used to improve the Nebraska EMS information system in terms of data capture, quality, and compliance with the Nebraska EMS Data Dictionary. During FY 2008, data quality checks were conducted on the data submitted by Lincoln Fire and Rescue, ENARISIS, and the Office of Health Statistics that entered and compiled EMS data (paper forms) for 2007. Currently specific EMS service data quality reports based on the type of run, are being produced, as well as a EMS Annual Data Report for 2011.

E-code Data Quality Assessment: Injury related hospital discharge (E-Code) data is a major data set for injury surveillance and injury prevention. Important injury surveillance activities have been implemented with the limited resources available in Nebraska. The Nebraska Injury Surveillance System has made significant development in the past years. The injury surveillance system has been extensively used to support highway safety and injury prevention programs at federal, state, and local levels. The quality of E-Code data is very important since it has a huge influence on public health. Nebraska CODES has been closely working with the Nebraska Hospital Association (NHA) to assess data quality and the level of hospital compliance with the Nebraska E-code law, monitor progress in E-code compliance,

provide feedback to reporting hospitals, and make recommendations for improvement. The quality of the 2011 E-code data was assessed and results were reported to the CODES Advisory Committee meeting. A quarterly data quality report is sent to each hospital to provide feedback on their ecode reporting.

2. Program manager, phone number

Ashley Newmyer, Epidemiology Surveillance Coordinator, 402-471-4377

3. # of State Employees 2 FTE and .5 UNL interns

4. # of clients served by program: statewide

5. Total Budget Amount \$268,552

6. Federal Funds Yes
\$ 268,552
% of budget 100%

7. State General Funds No
\$
% of budget

8. State Cash Funds No
\$
% of budget

9. Specified Tax Source No
Name
\$ Amount

10. Contract with private providers for services No
Providers
\$ contracted
Clients served

11. Grant awarded by program No
Grantees
\$ Grants
Clients served

12. Mandated services
State No
Statute citation:
Federal No
Oversight agency:
Regulation citation:

13. Evidence-based performance assessment process in place by program: Yes

Describe: Monthly progress report to the Nebraska Office of Highway Safety in addition to annual site visit.

14. Additional information: None

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Ashley Newmyer

Contact # 402-471-4377

1. Program name, mission, description, history

Nebraska Emergency Medical Services (EMS) Data

Mission/Purpose: To provide a central data bank of accurate, precise, and current patient care data for evaluating and improving the performance of EMS, public health purposes pursuant to rules and regulations of the department.

Description: Emergency medical services or out-of-hospital emergency care providers complete a patient care record for each service or provider response. The report containing medical care and run information is sent to the Department quarterly, within 30 days of the end of each quarter. The Department tracks the reports for compliance, and for patient care improvement.

History: Before 2004, the EMS patient care data were reported primarily on paper commonly known as the “NARSIS” (Nebraska Ambulance Rescue Service Information System) form. In the fall of 2004 the EMS Program introduced “e-NARSIS” (electronic NARSIS), in an effort to bring the process of patient care documentation into the 21st century. Since 2004, increasingly more EMS services use e-NARSIS to report their patient care data electronically, although a few services still prefer paper forms. Currently, EMS patient care data are reported by E-NARSIS, third party software and paper forms.

- 2. Program manager, phone number: Doug Fuller 402/471-3578
 Ashley Newmyer 402/471-4377
- 3. # of State Employees: None
- 4. # of clients served by program: statewide.
 Emergency medical services or out-of-hospital emergency care providers.
- 5. Total Budget Amount 0
- 6. Federal Funds:
 % of budget:
- 7. State General Funds No

% of budget

8. State Cash Funds No
% of budget:

9. Specified Tax Source: No

10. Contract with private providers for services: No

11. Grant awarded by program: No

12. Mandated data collection (services)

State: Yes. Emergency medical services or out-of-hospital emergency care providers must complete a patient care record for each response that the service or provider makes. Patient medical care and run information must be sent to the Department quarterly, within 30 days after the end of each quarter, for inspection and use for data collection and research.

Statute citation: Neb. Rev. Stat. § 38-1225

Federal: No

Oversight agency:

Regulation citation: Title 172 Professional and Occupational Licensure
Chapter 12 Emergency Medical Services, Section 003 and
004

13. Evidence-based performance assessment process in place by program: No
Describe:

14. Additional information: None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 16, 2014

Prepared by: Robin Williams

Contact # 402-471-0935

1. Program name, mission, description, history

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) - Building and Strengthening Epidemiology, Laboratory and Health Information Systems Capacity in State and Local Health Departments

The purpose of the ELC program is to improve surveillance for, and response to, infectious diseases by (1) strengthening epidemiologic capacity; (2) enhancing laboratory capacity; (3) improving information systems, with a focus on Electronic Laboratory Reporting (ELR); (4) developing and implementing prevention and control strategies and (5) enhancing collaboration among epidemiology, laboratory, and information systems components of public health departments. Epidemiology, laboratory science and health information systems are the three cornerstones of the ELC.

The focus of the activities is primarily on naturally occurring infectious diseases and drug-resistant infections; however, some infrastructure built (especially in the health information systems realm) can be leveraged for non-infectious diseases. The activities that Nebraska has received funding for are classified into activities seen below:

Activity A: Epidemiology Capacity: Ensure health departments are well equipped with staff, surveillance systems and other tools to identify, characterize, and provide rapid, effective, and flexible response to infectious disease threats.

Activity B: Laboratory Capacity: Develop modern and well-equipped public health laboratories, with well-trained staff, employing high quality laboratory processes and systems that foster communication and appropriate integration between laboratory and epidemiology functions.

Activity C: Health Information Systems – ELR Capacity: Develop and enhance current health information infrastructure for public health agencies, with a focus on advancing ELR implementation. Working towards modern, standards-based and interoperable systems that support electronic exchange of information within and between epidemiology and laboratory functions in public health agencies (e.g., systems that support public health surveillance and investigation, laboratory information management systems (LIMS)); among local, state, and

federal public health agencies; and between public health agencies and clinical care systems, (e.g., health care providers, hospital emergency departments, clinical laboratories), including supporting Meaningful Use.

Activity D: National Electronic Disease Surveillance System: Promote the use of data and information system standards to advance the development of efficient, integrated, and interoperable surveillance systems at federal, state and local levels.

Activity E: Foodborne: Enhance capacity for investigation, control, and reporting of foodborne disease outbreaks and improve laboratory-based surveillance for emerging foodborne pathogens.

Activity G: Healthcare-Associated Infections: Support, maintain, and enhance efforts to reach healthcare-associated infection prevention goals to build and sustain state programs to prevent healthcare-associated infections.

Activity H: West Nile Virus and other Arboviral: Develop and implement effective surveillance, prevention, and control of arboviruses that occur or are imported into the Nebraska.

Activity K. Influenza: Implement enhanced capacity for respiratory viruses.

2. Program manager, phone number – Robin Williams, 402-471-0935
Principal Investigator – Ming Qu 402-471-0566
3. # of State Employees 2.25
4. # of clients served by program – Statewide
5. Total Budget Amount

| | |
|---|--|
| <u>2013 ELC: NON-PPHF</u> | <u>\$436,109.00 (08/01/2013 – 7/31/2014)</u> |
| National Electronic Disease Surveillance System | |
| Foodborne | |
| West Nile Virus | |
| Influenza | |
| | |
| <u>2013 ELC: PPHF</u> | <u>\$712,309.00 (08/01/2013 – 7/31/2014)</u> |
| Epidemiology Capacity | |
| Laboratory Capacity | |
| Health Information Systems | |
| Healthcare-Associated Infections | |
6. Federal Funds Yes
 \$ see above
 % of budget 100%

7. State General Funds No
 \$ N/A
 % of budget N/A
8. State Cash Funds No
 \$ N/A
 % of budget N/A
9. Specified Tax Source No
 Name
 \$ Amount
10. Contract with private providers for services Yes
 ELC: non-PPHF #Providers 33 \$ contracted \$390,417.00
 ELC: PPHF #Providers 6 \$ contracted \$526,279.00
 # Clients served Statewide
11. Grant awarded by program No
 # Grantees
 \$ Grants
 # Clients served
12. Mandated services
 State Yes
 Statute citation: Infectious Disease Reporting Chapters for Title 173-DHHDS
 Chapter 1
 Federal Yes
 Oversight agency: CDC
 Regulation citation: Provide services outlined in grant application and funded,
 including electronic reporting of infectious disease, and laboratory testing.
13. Evidence-based performance assessment process in place by program
 No
 Describe:
14. Additional information: None.

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Ge Lin, Ph.D

Contact # 402-416-8539

1. Program name, mission, description, history

GIS Program

The GIS Program provides geographic information services to the Department of Health and Humans Services and other public health partners across the state. The GIS program maintains accurate and complete public health geospatial data that is utilized to assist in public health planning, surveillance, and response to public health needs.

With an emphasis of program support for BT mapping and rapid response, it also supports mapping activities for all programs in the Public Health Division.

2. Program coordinator, phone number Ge Lin 402-416-8539

3. # of State Employees 1.5

4. # of clients served by program Agency wide

5. Total Budget Amount : \$130,000.00

6. Federal Funds Yes
% of budget 100

7. State General Funds No
% of budget

8. State Cash Funds No
% of budget

9. Specified Tax Source No
Name
\$ Amount

10. Contract with private providers for services No
Providers
\$ contracted
Clients served

11. Grant awarded by program No
Grantees
\$ Grants

Clients served

12. Mandated services

State No

Statute citation:

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program

No

14. Additional information:

Quarterly reports are on file.

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Carla Becker

Contact # 402-471-3575

1. Program name, mission, description, history

Hospital & Nursing Home Utilization Statistics

Mission/Purpose: Provide utilization rates to support Certificate of Need activities and follow trends in these rates

Description: Collect quarterly information from long-term care facilities (N=227) and monthly information from hospitals (N=97). Long-term care data is used to generate occupancy rates for each licensed facility. Hospital data is provided to the Nebraska Hospital Association for further utilization and other facilities upon request.

History: Collection of utilization information for hospitals and long-term care facilities began in the mid 1970's to provide data for the State Health Plan; CON activities; trends in facility utilization; and, utilization statistics for the general public and internal users.

2. Program manager, phone number: Carla Becker 402/471-3575
3. # of State Employees: 0.5
4. # of clients served by program: Nebraska Hospital Association, the programs of licensure, rural health within DHHS are the regular clients, hospitals and long-term care facilities.
5. Total Budget Amount \$38,898
6. Federal Funds No
7. State General Funds Yes
\$ 38,898
% of budget: 100%
8. State Cash Funds No
% of budget:

9. Specified Tax Source No

10. Contract with private providers for services No

11. Grant awarded by program No

12. Mandated data collection (services)

State: Yes. Existing hospitals are mandated to assist DHHS with the collection of monthly discharge health statistics. Each long-term care facility shall report on a quarterly basis to the department the number of residents at such facility on the last day of the immediately preceding quarter on a form provided by the department.

Statute citation: Neb. Rev. Stat. §§ 71-2007 and 71-5829.04 (3)

Federal No

Oversight agency: NA

Regulation citation: No

13. Evidence-based performance assessment process in place by program: No

Describe:

14. Additional information: None

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Ashley Newmyer

Contact #: 402-471-4377

1. Program name, mission, description, history

Injury Surveillance

Mission: To collect, analyze, and report surveillance data, to monitor trends and patterns of fatal and non-fatal injuries, and to use the information to reduce and prevent injury, disability and death in Nebraska.

Description: Existing data sets utilized include hospital discharge data, vital statistics, Behavioral Risk Factor Surveillance System, and the Youth Behavioral Risk Factor Surveillance System. Recent and upcoming reports include the CDC Nebraska Injury Indicator report 2011, CDC Special Emphasis: Infant and Early Childhood Injury 2011, CDC Special Emphasis: Traumatic Brain Injury Report 2011 and accompanying fact sheets; Older Adult Falls 2007-2011 Fact Sheet, Prescription Drug Overdose Report 2007-2011, and the Injury in Nebraska 2008-2012 report.

History: A 0.5 FTE health surveillance specialist position was filled in January 2010 to conduct surveillance activities for the Injury Prevention and Control Program. Since January 2010 the personnel allocation has been reduced to 0.25 FTE of an epidemiology surveillance coordinator position which was filled in August 2013.

2. Program manager and title:

Ashley Newmyer, Epidemiology Surveillance Coordinator
Phone number: 402-471-4377

3. # of State employees: 0.25 FTE

4. # of clients served by program: Statewide

5. Total budget amount: \$23,346

6. Federal Funds: \$23,346
% of budget: 100.0

7. State General Funds: \$0
% of budget: 0

8. State Cash Funds: \$0
% of budget: 0

9. Specified tax source:

Name:

\$ Amount: \$0

10. Contract with private providers for services:

of providers:

\$ contracted:

Clients served:

11. Grant awarded by program: No

Grantees

\$ Grants

Clients served

12. Mandated Services

State: No

State citation:

Federal: No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program

Describe:

14. Additional information

The Injury Surveillance position has underwent three personnel transitions since May of 2011 but through good communication and teamwork, has remained on target to complete the grant requirements.

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Derry Stover

Contact # 402-471-2282

1. Program name, mission, description, history

Name: Nebraska Occupational Safety and Health Program

Mission: The mission of this program is to promote and improve the health and safety of all workers in Nebraska.

Description: The Nebraska Occupational Safety and Health Surveillance Program collects, analyzes, and interprets occupational health surveillance data to learn more about how, where, and why work-related injuries and illnesses occur. The program generates Nebraska's 21 Occupational Health Indicators, which are specific measures of health or risk status of workers. In addition to data collection and analysis, the program develops and disseminates reports, educational materials, and prevention recommendations to our stakeholders to help develop public health prevention and intervention strategies. The program builds new collaborations and maintains a network of health and safety partners to prioritize worker health issues and activities in Nebraska. The goal of the program is to reduce the incidence of injuries and illnesses among working people in Nebraska.

History: The Nebraska Occupational Safety and Health Program is funded by National Institute for Occupational Safety and Health (NIOSH), an institute within the Centers for Disease Control and Prevention (CDC). The NIOSH mission is to prevent injury, illness, and deaths caused by hazards in the workplace. NIOSH funds state-based surveillance programs to help to enumerate and describe the extent of occupational hazards in the United States. The state-based surveillance programs, like the program in Nebraska, have identified many problems that require additional research and prevention intervention efforts. The grant received in Nebraska is a five year grant, from July 1, 2010 to June 30, 2015.

2. Program manager and title:

Derry Stover, Epidemiology Surveillance Coordinator
Phone number: 402-471-2282

3. # of State employees: 1

4. # of clients served by program:

No defined number; targeted subjects/clients are all employed persons and all employers in Nebraska.

5. Total budget amount: \$120,000
6. Federal Funds: \$120,000
% of budget: 100
7. State General Funds: \$0
% of budget: 0
8. State Cash Funds: \$0
% of budget: 0
9. Specified tax source:
Name: N/A
\$ Amount: 0
10. Contract with private providers for services:
of providers: 0
\$ contracted: 0
Clients served: 0
11. Grant awarded by program: no
Grantees: 0
\$ Grants: 0
Clients served: 0
12. Mandated Services
State: No
State citation:
Federal: No
Oversight agency: None
Regulation citation: None
13. Evidence-based performance assessment process in place by program: No
Describe: Performance assessment is performed via annual non-competitive renewal applications completed by the Nebraska Occupational Safety and Health Program and submitted to NIOSH. Renewal of the grant/funding is based on NIOSH's review of the application and the accomplishments of the program throughout the year.
14. Additional information: None

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Michelle Hood

Contact # 402-471-0147

1. Program name, mission, description, history

Outpatient Surgical Procedures Database

Mission/Purpose: (1) The collection and compilation of outpatient surgical procedure information from hospitals and ambulatory surgical centers; (2) the use and disclosure of such information for public health purposes; and (3) periodic reporting to the Legislature and an annual statistical report.

Description: Collect annually information from hospitals (N=95) and ambulatory surgical centers (N=50) to identify potential policies or practices of any reporting facility which may be detrimental to the public health, including, but not limited to, policies and practices which may have the effect of limiting access to needed health care services for Nebraska residents.

History: Collection of outpatient surgical procedure information from hospitals and ambulatory surgical centers began in 2006 to generate annual statistical reports for public health purpose.

2. Program manager, phone number: Michelle Hood 402/471-0147
3. # of State Employees: 0.5
4. # of clients served by program: Nebraska Hospital Association, the programs of licensure, rural health within DHHS are the regular clients
5. Total Budget Amount \$38,898
6. Federal Funds No
7. State General Funds No
% of budget
8. State Cash Funds Yes
\$38,898
% of budget: 100%

9. Specified Tax Source: No
10. Contract with private providers for services No
11. Grant awarded by program No
12. Mandated data collection (services)
State: Yes. Every hospital or ambulatory surgical center licensed under the Health Care Facility Licensure Act.
- Statute citation: Neb. Rev. Stat. §§ 81-6,111 to 81-6,119.
Federal No
Oversight agency: NA
Regulation citation: Title 186 Health Registries and Release of Information, Chapter 6 Outpatient Surgical Procedures Data
13. Evidence-based performance assessment process in place by program: No
Describe:
14. Additional information: None

**DHHS Program Data and Information Form
Epidemiology & Informatics Unit**

Date: September 9, 2014

Prepared by: Jill Krause

Contact # 402-471-8582

1. Program name, mission, description, history

Nebraska Parkinson's Disease Registry

The purpose is to provide a central data bank of accurate, historical and current information for research purposes.

It is a database of Nebraska residents who have been diagnosed with Parkinson's disease.

LB 496 was passed in 1996. During the 2001 Legislative session, the law creating the Parkinson's Disease Registry was briefly repealed, however LB 152 revived the Registry and gave the DHHS the responsibility to continue all operations. Terminated in October 2004, the Registry was reactivated February 1, 2006.

2. Program manager, phone number: Jill Krause 402-471-8582
3. # of State Employees: 1
4. # of clients served by program: statewide
5. Total Budget Amount \$26,000
6. Federal Funds No
7. State General Funds No
8. State Cash Funds Yes
 \$26,000
 % of budget 100%
9. Specified Tax Source No
10. Contract with private providers for services No
11. Grant awarded by program No

12. Mandated services

State Yes

Statute citation: Neb. Rev. Stat. §§ 81-697 to 81-6,110

Federal No

Oversight agency: NA

Regulation citation: Title 186 Health Registries and Release of Information,
Chapter 4 Parkinson's Disease Registry

13. Evidence-based performance assessment process in place by program: No

Describe:

14. Additional information: None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Ashley Newmyer

Contact # 402-471-4377

1. Program name, mission, description, history

Nebraska Trauma Registry

Nebraska Trauma Registry is a database which contains detailed information about each trauma patient in Nebraska. The trauma registry includes several types of data regarding patient demographic information, patient insurance category, injury, pre-hospital activity, the referring hospital, the receiving hospital and the rehabilitation center.

Nebraska Trauma Registry was set up in 2003 and started with six leading trauma centers in the state. Currently 52 hospitals submit trauma data to DHHS monthly and over 9,500 records annually.

The purpose of the trauma registry data is to evaluate the state trauma system efficiency and effectiveness, and the quality of care provided to all who enter the system. It provides information to identify areas for trauma care improvements. The trauma registry is also critical to support injury surveillance and prevention efforts at federal, state, and local levels. In addition, the registry has furnished information to many research institutions in Nebraska and nationwide.

2. Program manager, phone number – Rachel Cooper, 402-471-1370

3. # of State Employees: 1

4. # of clients served by program: Statewide

5. Total Budget Amount: \$200,000

6. Federal Funds: No

7. State General Funds: No.

8. State Cash Funds: Yes. \$200,000 100%

9. Specified Tax Source

Name: 50 cents for life tax on motor vehicle registration.

\$ Amount: about \$200,000

10. Contract with private providers for services Yes
Clients served Statewide

11. Grant awarded by program No

12. Mandated services

State : Yes

Statute citation: Neb. Rev. Stat. 71-8248 and 71-8249

Federal: No

Oversight agency: American College of Surgeons

Regulation citation: Title 185 - Nebraska Statewide Trauma System, Chapter 9
Trauma Registry

13. Evidence-based performance assessment process in place by program
Yes.

Describe: the data quality of the Nebraska Trauma Registry is assessed monthly.

14. Additional information:

The Nebraska Trauma Board, in addition to the four Regional Trauma Boards rely on the data reports produced by the state trauma registrar to direct, further develop, and improve the Nebraska Trauma System.

12. Mandated services

State No

Statute citation:

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program

Yes

Describe: Rabies testing performance standards in contract are monitored by Acting State Public Health Veterinarian.

14. Additional information: None

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Mark Miller

Contact # 471-0355

1. Program name, mission, description, history

Vital Statistics Cooperative Program (birth, death, fetal death)

This is funded by CDC (Centers for Disease Control and Prevention)-NCHS (National Center for Health Statistics). The program was started in the 1970's and includes all US States, Territories, NY City and the District of Columbia. Timely, quality data files are sent to NCHS. Nebraska's data are part of the national data set. Non-resident records are also shared with other jurisdictions and resident records are received (event occurred in another jurisdiction but the person was a resident of Nebraska) as part of the Inter-Jurisdictional Exchange (IJE) Agreement. Resident statistical files allow us to have quality information about Nebraskans health. Jurisdictions also share records where the death occurred in their jurisdiction but the birth occurred in another jurisdiction. By receiving death records from other jurisdictions that were born in Nebraska, we can match and flag the birth record deceased to help prevent fraudulent use of the birth records. Records received from other jurisdictions are currently paper based and electronic. Electronic records are received through STEVE (State and Territorial Exchange of Vital Events). STEVE is a requirement under the VSCP contract for all jurisdictions to implement by January 1, 2014.

Social Security Administration

This is funded by the Social Security Administration. We send weekly birth information to SSA with the purpose of SSA issuing a Social Security Number and card to newborn parents that have given permission on the mother's worksheet. Of the total number of births in Nebraska, approximately 99.5% of parents give permission with the average turnaround time from birth to receiving the card is 2-3 weeks.

Our Electronic Death Registration System (EDRS) has an electronic link to SSA's on-line verification system. Funeral Homes that use the EDRS receive timely responses back if the information they have entered into the system matches or doesn't match the information SSA has on file. There is about a 95% match rate. Death files are sent to SSA daily that then will automatically change the benefit status.

System Administration of the Vital Records Electronic Registration System

Provide system administration of the Vital Records Electronic Registration System. This includes making system changes and adding features as needed or requested by our users. The system includes electronic reporting of births, deaths, marriages, divorces, birth defects and newborn hearing. Electronic reporting of abortions will begin soon and electronic reporting of fetal deaths is planned. Money received from NCHS and SSA also helps pay for the system maintenance costs, purchasing new or updating hardware such as servers, and other technology that will help our users.

Support Services

This includes data entry of paper records received which includes death records from death providers not using the electronic system, resident records received from jurisdictions that haven't converted to electronic reporting, abortions, and birth defect cases for facilities behind in their reporting. We also provide help desk support for the electronic registration system and assist in training.

Data Sharing

Data files are provided nightly/or weekly to various programs for administrative and statistical use inside and outside DHHS. Birth, Death, Marriage and Divorce files are provided to CHARTS (child support); death files are provided to the Dept. of Motor Vehicles and the Secretary of States' office (voter registration) for purging of records; Birth records for the immunization registry and PRAMS. Data files are also used for the creation of Vital Statistics report and ad hoc requests by the public. Data files are also used by local health departments for their own statistical research. Death files are also linked with the Cancer Registry and Parkinson's Disease Registry.

2. Program manager, phone number: Mark Miller, 471-0355
3. # of State Employees: 3
4. # of clients served by program 2500+ (includes users of the electronic registration system)
5. Total Budget Amount \$333,000
6. Federal Funds: Yes
\$330,000
% of budget 99.1%
Other 0.9% from data requests and non DHHS agencies receiving data.
7. State General Funds No
8. State Cash Funds No
9. Specified Tax Source No

10. Contract with private providers for services No

11. Grant awarded by program No

12. Mandated services

State Yes

Statute citation: Neb. Rev. Stat. §§ 28-345; 71-601 to 71-649;
71-4816; 43-119 to 43-165; 43-2001 to 43-2012;

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program: Yes

Describe:

Receive data quality feedback from NCHS.

Money received from SSA for deaths is based on timelines of reporting (more users using the electronic system translates into more money received).

Track percentage of users using electronic death registration system.

Track when the yearly vital statistics data files are finalized and ready for release for year end statistics.

14. Additional information:

Currently, all birthing facilities file births electronically, all county marriage clerks file electronically and all dissolutions are filed electronically. If through legislation, the electronic death reporting process can be required, it would make processing of death records much more efficient. Currently, 84% of death records are being initiated by funeral homes using the EDRS and about 38% are completed electronically by the certifier (physician, physician assistant, nurse practitioner or county attorney). In 2008, 50.9% were initiated by the funeral director, with 13.8% completely electronic. Electronic reporting of death certificates was implemented March, 2006.

DHHS Program Data and Information Form Epidemiology & Informatics Unit

Date: September 9, 2014

Prepared by: Sandra Gonzalez

Contact # 402-471-0141

1. Program name, mission, description, history

Syndromic Surveillance System

Syndromic Surveillance refers to the near real-time collection and review of medical information on signs and symptoms of a disease before the diagnosis is made. This system was first implemented by the New York City Department of Health and Mental Hygiene shortly after the events of September 11, 2001 in response to their concern about the possibility of a bioterrorism event.

The health information collected for syndromic surveillance could include patient visit identifier, age, gender, race, zip code, reason for visit (chief complaint), diagnostic codes, etc. However, no personal identifiers such as patient name, address of residence, social security number, etc., are included in the syndromic data. This health data can then be analyzed to find various syndromes such as influenza like illness, food-borne illness, heart disease, cancer, etc. Results from these analyses can be used to determine if there is a significant impact on public health in a specific area or region.

In 2009 the NDHHS developed the Syndromic Surveillance and Event Detection of Nebraska (SSEDON) following the emergence of pandemic H1N1 influenza earlier that year. After the initial startup and early success, NDHHS is expanding the access to SS data and information from electronic health records (EHRs) of eligible professionals (EP), eligible hospitals, and critical access hospitals with the advent of Meaningful Use (MU). Currently, the NDHHS syndromic surveillance system has the capability for the collection, tracking and monitoring of health information from emergency departments and inpatient facilities.

In 2011, the NDHHS implemented a near-real-time and inpatient surveillance system to enhance the surveillance of cardiovascular disease in Nebraska. This surveillance system facilitates near-real-time assessment of cardiovascular disease risk factors, outcomes, and prevention program efficacy.

2. Program manager, phone number – Sandra Gonzalez 402-471-0141

3. # of State Employees: .5

4. # of clients served by program: Statewide
5. Total Budget Amount: \$260,173.00
6. Federal Funds Yes
 \$ 260,173.00
 % of budget: 100%
7. State General Funds No
 \$ 0
 % of budget 0%
8. State Cash Funds No
 \$0
9. Specified Tax Source: Not Applicable
 Name
 \$ Amount
10. Contract with private providers for services Yes
 # Clients served: Statewide
11. Grant awarded by program No
 # Grantees
 \$ Grants
 # Clients served
12. Mandated services
 State: No
 Statute citation:
 Federal: No
 Oversight agency:
 Regulation citation:
13. Evidence-based performance assessment process in place by program
 No
 Describe: This is a fairly new program therefore we are currently developing
 work plans to move the projects forward.
14. Additional information: None.

Date: September 10, 2014

Prepared by: Michelle Hood

Contact # 402-471-0147

1. Program name, mission, description, history

Nebraska State Immunization Information System (NESIIS)

The Nebraska Department of Health and Human Services (NDHHS) utilizes the Nebraska State Immunization Information System (NESIIS) to ensure appropriate immunization of Nebraska citizens. The system is web-based, statewide, across-the-lifespan, and capable of uni-directional and bi-directional data exchange with other electronic health record systems. NESIIS is able to accept and send HL7 formatted data and assures the security, privacy, confidentiality and accuracy of the data transferred to and from, as well as within, the system. NDHHS has been working with providers to exchange immunization data electronically for the past 3 years. Nebraska does not have a Statute which **requires** providers to report immunization to the state IIS but it does have a statute in place that supports the sharing of immunization data via user interface, public access, and electronic data exchange (including inter-state data exchange).

The software used came from the State of Wisconsin, Wisconsin Immunization Registry (WIR) system and is being made available free of charge to all immunization providers who become registered users. The core registry module was completed in June, 2008. Pilot testing occurred during July, August, and September of 2008, and full implementation commenced on October 1, 2008. Upon implementation NESIIS contained approximately 250,000 client records and 1,200,000 immunizations. Currently (as of September 1, 2014) the system contained over 1,538,607 clients and 11,901,270 immunizations.

Newborns are enrolled in NESIIS within six weeks of birth through a link with the Nebraska Department of Health and Human Services Vital Records Department. Any immunization administered by a health care provider can be recorded in NESIIS. Patients and parents that do not want their information shared with other providers are given the option to opt out from their data being shared with subsequent providers. The software automatically recommends needed vaccines according the ACIP guidelines and produces reminder/recall letters and reports, including an official immunization record. Providers can produce coverage level reports for their practices to assist them in maintaining high immunization rates. NDHHS has worked on many enhancements to NESIIS. Some of these projects include: 1) a Perinatal Hepatitis B module which allows us to track and monitor maternal Hepatitis B cases and the children and contacts of females who test positive for Hepatitis B; 2) a Refugee Screening Module which allows us to compile and track the health status of refugees entering our State; 3) interoperability with VTrckS so that VFC vaccine can be

ordered through NESIIS; 4) the ability to capture patient eligibility at the dose level; 5) the ability to accept and send HL7 2.5.1 formatted files; and 6) SOAP Web Services for secure transport of immunization data.

2. Program manager, phone number –Jesse Clarke 402-471-3727
3. # of State Employees: .75
4. # of clients served by program: Statewide
5. Total Budget Amount: \$715,825.00
6. Federal Funds Yes
 \$ 715,825.00
 % of budget: 100%
7. State General Funds No
 \$ 0
 % of budget 0%
8. State Cash Funds No
 \$0
9. Specified Tax Source: Not Applicable
 Name
 \$ Amount
10. Contract with private providers for services Yes
 # Clients served: Statewide
11. Grant awarded by program No
 # Grantees
 \$ Grants
 # Clients served
12. Mandated services
 State: No
 Statute citation:
 Federal: No
 Oversight agency:
 Regulation citation:
13. Evidence-based performance assessment process in place by program
 Yes
 Describe: The NESIIS program has spent the past 2 years developing data monitoring processes to assess the quantity and quality of the data received.

Weekly, monthly, and annual reports are developed and distributed to monitor the success of the program.

14. Additional information: None.

Table of Contents Health Promotion Unit

| | |
|---|----|
| Cancer and Smoking Disease Research..... | 1 |
| Comprehensive Cancer Control..... | 2 |
| Hepatitis Control Program..... | 3 |
| HIV Prevention and Control..... | 4 |
| HIV Surveillance..... | 5 |
| Housing Opportunities for People with AIDS..... | 6 |
| Injury Prevention and Control..... | 7 |
| Oral Health and Dentistry..... | 8 |
| Organ and Tissue Donor Program..... | 9 |
| Preventative Health and Health Services Block Grant..... | 10 |
| Chronic Renal Disease Program..... | 11 |
| Ryan White Program..... | 12 |
| STD Prevention and Control..... | 13 |
| Tobacco Free Nebraska Program..... | 14 |
| Tuberculosis Prevention and Control..... | 15 |
| State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health..... | 16 |

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Cancer and Smoking Disease Research

State Statute requires that three cents from the tax of each package of cigarettes be provided to Eppley Cancer Institute, Creighton University and all campuses of the University of Nebraska to perform cancer research.

2. Program manager, phone number: Mary Weatherfield (402) 471-0925

3. # of State Employees: 1.0 FTE

4. # of clients served

5. Total Budget Amount: \$ 3,7

6. Federal Funds: _____ yes no

7. State General Funds: yes _____ no
\$ 3,701,461
% of budget: 100%

8. State Cash Funds: _____ yes no

9. Specified Tax Source: yes _____ no
Name: Three cent tax on pack of cigarettes
\$ Amount: \$ 3,701,461

10. Contract with private providers for services: _____ yes no

11. Grant awarded by program: yes _____ no
Grantees: 16
\$ Grants: \$ 3,096,103

12. Mandated services:

State yes _____ no
Statute citation: 81-638ff

13. Evidence-based performance assessment process in place program:

_____ yes no

Describe:

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Comprehensive Cancer Control

The Comprehensive Cancer program developed a statewide coalition of medical practitioners and others who are building systems to educate Nebraskans on how to reduce or control the incidence of cancer. They also develop systems to support those who are being treated or are living with various forms of cancer.

2. Program manager, phone number: Elizabeth Green (402) 471-0369

3. # of State Employees: 2

4. # of clients served: statewide

5. Total Budget Amount: \$338,877

6. Federal Funds: yes no
\$ 338,877
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

11. Grant awarded by program: yes no

12. Mandated services:

State: yes no

Federal: yes no

13. Evidence-based performance assessment process in place by program:

yes no

Describe: CDC has a specific performance assessment that is applied to the program.

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Hepatitis Control Program

The Hepatitis Prevention Program is designed to educate health care practitioners and Community members on how to prevent hepatitis infection. The program also works with organization to provide hepatitis testing, linkage to care and treatment options.

2. Program manager, phone number: Jude Dean, MS (402) 471-8252

- 3 # of State Employees: 1.0 FTE

- 4 # of clients served: statewide

5. Total Budget Amount: \$110,390.00

6. Federal Funds: X yes no
\$ 110,390.00
% of budget: 100%

7. State General Funds: yes X no

8. State Cash Funds: yes X no

9. Specified Tax Source: yes X no

10. Contract with private providers for services: yes X no

11. Grant awarded by program: yes X no

12. Mandated services:

| | | |
|---------|-------------------|-----------------|
| State | <u> </u> yes | <u> X </u> no |
| Federal | <u> </u> yes | <u> X </u> no |

13. Evidence-based performance assessment process in place by program
 X yes no

Describe: CDC performs an annual evaluation to insure evidence based performance.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

HIV Prevention and Control

HIV Prevention program is designed to reduce the risk of individuals contracting HIV and to work with those who are living with HIV.

2. Program manager, phone number: Nancy Jo Hansen (402) 471-8701

3. # of State Employees: 3.85

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 913,674

6. Federal Funds: yes no
\$ 913,674
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
Providers: 1
\$ contracted: \$ 35,000

11. Grant awarded by program: yes no
Grantees: 12
\$ Grants: \$ 658,231
Clients served: statewide

12. Mandated services:

State: yes no

Statute citation: 71.501

Federal: yes no

Oversight agency: Centers for Disease Control

Regulation citation: 307, 317K2 PHSA, 42USC241, 247K2, PL108

13. Evidence-based performance assessment process in place by program
 yes no

Describe: Specific indicators and performance based objectives are detailed within the award guidance and application process.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

HIV Surveillance

HIV Surveillance program is designed to record and manage the number of individuals who are diagnosed as HIV positive.

2. Program manager, phone number: Cheryl Bullard (402) 471-0360

3. # of State Employees: 1.8

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 209,628

6. Federal Funds: yes no
\$ 209,628
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
providers: 1
\$ contracted: \$ 29,250

11. Grant awarded by program: yes no

12. Mandated services:

State: yes no

Statute citation: 71-501.02

Federal: yes no

Oversight agency: CDC

Regulation citation: 307, 317K2 PHSA, 42USC241, 247BK2, PL108

13. Evidence-based performance assessment process in place by program

yes no

Describe: Specific core performance measures and expectations are in place as established by the National Center for HIV within CDC.

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history

Housing Opportunities for People with AIDS

Housing Opportunities for People with AIDS (HOPWA) program is designed to secure permanent housing for individuals who are living with AIDS. In addition, the program provides extensive case management services to support individuals in their homes and to ensure that they are following the medical regime.

2. Program manager, phone number: Judy Anderson (402) 471-0937

3. # of State Employees: 1

4. # of clients served by program: 217

5. Total Budget Amount: \$ 357,000

6. Federal Funds: yes no
\$ 357,000
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
Providers: 1
\$ contracted: \$280,700
Clients served: 217

11. Grant awarded by program: yes no

12. Mandated services

State yes no

Federal: yes no

Oversight agency: US Department of Housing and Urban Development (HUD) Code of Federal Regulation: 24CFR – Part 91 and 574

13. Evidence-based performance assessment process in place by program

yes no

Describe: Monthly reporting and annual evaluation of outcomes by HUD.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Injury Prevention and Control

The Injury Prevention and Control Program was established to reduce the incidence and/or severity of injuries to Nebraskans.

2. Program manager, phone number: Peg Ogea-Ginsburg (402) 471-3490

3. # of State Employees: 2.4

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 595,115

6. Federal Funds: yes no
\$ 595,115

% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

Providers: 4

\$ contracted: \$ 77,000

Clients served: statewide

11. Grant awarded by program: yes no

Grantees: 7

\$ Grants: \$ 293,922

Clients served: statewide

12. Mandated services:

State: yes no

Federal: yes no

13. Evidence-based performance assessment process in place by program

yes no

Describe: CDC has specific performance standards that must be met in order to continue to receive funding.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Office of Oral Health and Dentistry

OOHD works with partners to improve access to preventive and restorative oral health services among residents of Nebraska. As of 2012, there were no practicing dentists in 20 of Nebraska's 93 counties, leaving too many people with no dental home.

This funding source is new and thus no contracts or grants have been developed.

2. Program manager, phone number - Barbara Pearson (402) 471-3485

3. # of State Employees: 2

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 260,000

6. Federal Funds: yes no

\$ 110,000

% of budget: 42.3 %

7. State General Funds: yes no

\$150,000

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

11. Grant awarded by program: yes no

12. Mandated services:

State: yes no

Statute citation: 38-1149 through 1151

Federal: yes no

Oversight agency: Health Resource Service Admin (HRSA) – Title V MCH Block Grant

13. Evidence-based performance assessment process in place by program

yes no

Describe: The Office of Oral Health and Dentistry promotes evidence-based best practice in planning interventions.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Organ & Tissue Donor Program

Organ and Tissue Donor Program encourages Nebraskans to donate organs and tissues at the time of their death through education and media sources.

2. Program manager, phone number: Mary Weatherfield (402) 471-0925

3. # of State Employees: 0.0 FTE

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 116,000

6. Federal Funds : _____ yes no

7. State General Funds: _____ yes no

8. State Cash Funds: yes _____ no
 \$ 116,000
 % of budget: 100%

9. Specified Tax Source: _____ yes no

 Name: Organ & Tissue Donor Awareness & Education Fund

 \$ Amount: \$1 voluntary donation at the time of driver's license renewal

10. Contract with private providers for services: yes _____ no

 # Providers: 1

 \$ contracted: \$ 80,000

 # Clients served: statewide

11. Grant awarded by program: _____ yes no

12. Mandated services:

 State: yes _____ no

 Statute citation: 60-484ff

 Federal: _____ yes no

13. Evidence-based performance assessment process in place by program

 _____ yes no

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact # (402) 471-2910

1. Program name, mission, description, history:

Preventive Health & Health Services Block Grant

The Preventive Health & Health Services Block Grant has existed since 1981 and provides NDHHS with relatively flexible funding to help address established federal health objectives (Healthy People 2020). Most of the funding goes to support programs within the Division of Public Health addressing health issues including injury prevention, laboratory testing for HIV and STD, minority health, emergency medical services, diabetes self-management, public health infrastructure, data surveillance and sexual assault prevention. The remainder currently supports local health departments and worksite wellness councils operated outside the NDHHS.

2. Program manager, phone number: Barbara Pearson (402) 471-3485

3. # of State Employees: 1 (fund manager)

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 1,414,526

6. Federal Funds: yes no
\$ 1,414,526
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

11. Grant awarded by program: yes no

Grantees: 14

\$ Grants: \$ 130,000 to external agencies, \$1,011,026 to internal programs

Clients served: statewide

12. Mandated services:

State: yes no

Federal : yes no

13. Evidence-based performance assessment process in place by program

yes no

Describe: All of external agencies and internal programs are required to cite evidence-based practices by which they will establish their workplan and each recipient must report accomplishment of their approved workplan.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Chronic Renal Disease Program

Renal program helps pay for the cost of medications and limited dialysis services for those who are low income and suffer renal failure.

2. Program manager, phone number: Mary Weatherfield (402) 471-0925

3. # of State Employees: 0.0 FTE

4. # of clients served by program: 680

5. Total Budget Amount: \$ 830,953

6. Federal Funds: _____ yes no

7. State General Funds: _____ yes no

8. State Cash Funds: yes _____ no

\$ 830,953

% of budget: 100%

Chronic Renal Disease Cash Fund

9. Specified Tax Source: _____ yes no

10. Contract with private providers for services: _____ yes no

11. Grant awarded by program: _____ yes no

12. Mandated services:

State: yes _____ no

Statute citation: 71-4901ff

Federal: _____ yes no

13. Evidence-based performance assessment process in place by program

_____ yes no

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Ryan White Program

The Ryan White program provides medications for those who are living with HIV and are not eligible for other medical coverage. In addition, the program provides a wide variety of case management services to help these individuals remain in their own homes and as independent as possible.

2. Program manager, phone number: Steve Jackson (402) 471-2504

3. # of State Employees: 2.25

4. # of clients served by program: 1,659

5. Total Budget Amount: \$ 3,694,909

6. Federal Funds: yes no
\$ 2,794,909
% of budget: 75.6%

7. State General Funds: yes no
\$ 900,000
% of budget: 24.4%

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
Providers: 8
\$ contracted: \$ 66,888
Clients served: 593

11. Grant awarded by program: yes no
Grantees: 2
\$ Grants: \$2,305,635
Clients served: 1,393

12. Mandated services:

State: yes no
Federal: yes no
Oversight agency: Health Resources & Services Administration
Regulation citation: PL 109-415 (Title XXIV PHS; CFDA 93.917)

13. Evidence-based performance assessment process in place by program
 yes no

Describe: The HRSA system requires the Ryan White program to meet specific performance standards and these are applied annually.

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

STD Prevention & Control

STD Prevention and Control program provides information, testing and control the spread of sexually transmitted diseases, including Syphilis, HIV, Chlamydia, and Gonorrhea.

2. Program manager, phone number: Jeri Weberg-Bryce (402) 471-6459

3. # of State Employees: 4.25 FTE

4. # of clients served by program: 40,732 people tested

5. Total Budget Amount: \$ 792,404

6. Federal Funds: yes no

\$ 440,652

% of budget: 56%

7. State General Funds: yes no

\$ 351,752

% of budget: 44%

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

providers: 2

\$ contracted: \$ 82,352

clients served: 75% of all clients served

11. Grant awarded by program: yes no

12. Mandated services:

State: yes no

Statute citation: 71-503

Federal: yes no

13. Evidence-based performance assessment process in place by program

yes no

Describe: CDC has specific standards that we must meet in interviews with those who are infected, and through partner identification and treatment.

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Tobacco Free Nebraska Program

Tobacco Free Program is a statewide comprehensive program that implements best practice interventions to reduce tobacco use in Nebraska.

2. Program manager, phone number: Jeff Soukup (402) 471-1807

3. # of State Employees: 6

4. # of clients served by program: statewide

5. Total Budget Amount: \$ 3,774,578

6. Federal Funds: yes no

\$ 1,303,356 – CDC Office of Smoking and Health, Core Funding

\$ 91,780 – CDC Office of Smoking and Health, Public Health Fund, Quitline Capacity

\$ 1,395,136 – Total % of budget: 37%

7. State General Funds: yes no

8. State Cash Funds: yes no

Name: Tobacco Master Settlement Agreement Funds/Health Care Cash Fund

\$ Amount: \$ 2,379,442 % of budget: 63%

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no

Providers: 11

\$ contracted: \$ 876,000

Clients served: Program serves statewide population via Media Campaign, Youth Empowerment movement, statewide tobacco cessation quitline, and surveillance and evaluation.

11. Grant awarded by program: yes no

Grantees: 20

\$ Grants: \$ 1,721,110

Clients served: TFN Program is population-based public health program; not client specific.

12. Mandated services:

State: yes no

Statute citation: 71-5714

Federal yes no

13. Evidence-based performance assessment process in place by program

yes no

Describe: The Centers for Disease Control's Office on Smoking and Health strongly encourages state tobacco control programs to conduct ongoing evaluation including the Behavior Risk Factor Survey, the Youth Risk Behavior Survey, and the Youth Tobacco Survey. The Tobacco Free Nebraska Program participated in these surveys at the state level to gauge the progress of adult and youth tobacco prevalence and other tobacco-related indicators.

**DHHS Program Data and Information Form
Health Promotion**

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history:

Tuberculosis Prevention & Control

Tuberculosis program provides public information regarding the control of tuberculosis and testing and medications for those who have been diagnosed with TB.

2. Program manager, phone number: Pat Infield (402) 471-6441

3. # of State Employees: 1.75

4. # of clients served by program: 800

5. Total Budget Amount: \$ 476,789

6. Federal Funds: yes no
\$ 318,133
% of budget: 67%

7. State General Funds: yes no
\$ 158,656
% of budget: 33%

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
Providers: 3
\$ contracted: \$ 49,000
Clients served: 27
Grant awarded by program: yes no

11. Mandated services:

State: yes no
Statute citation: 71-3614
Federal: yes no

12. Evidence-based performance assessment process in place by program:

yes no

Describe: The Centers for Disease Control has specific performance criteria that are used to evaluate our program.

DHHS Program Data and Information Form Health Promotion

Date: September 10, 2014

Prepared by: Kay L. Wenzl

Contact #: (402) 471-2910

1. Program name, mission, description, history

State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health

This program is charged with improving multiple chronic diseases and the risk factors associated with the following public health priorities: uncontrolled hypertension; the prevention and control of diabetes; the incidence of obesity; increased physical activity and healthy eating in children and adults; and increased breastfeeding. Program strategies draw from each of the four chronic disease domains (surveillance and epidemiology, environmental approaches, health systems improvements, and community-clinical linkages). These efforts will be supported by core public health activities such as partnership engagement, workforce development, guidance and support for programmatic efforts, strategic communication, surveillance and epidemiology, and evaluation.

2. Program managers, phone number: Jamie Hahn (402) 471-3493

3. # of State Employees: 9.8

4. # of clients served: statewide

5. Total Budget Amount: \$ 1,534,249

6. Federal Funds: yes no
\$ 1,534,249
% of budget: 100%

7. State General Funds: yes no

8. State Cash Funds: yes no

9. Specified Tax Source: yes no

10. Contract with private providers for services: yes no
Providers: 33
\$ contracted: \$ 667,644

11. Grant awarded by program: yes no

12. Mandated services:
State yes no
Federal yes no

13. Evidence-based performance assessment process in place by program
 yes no

Describe: The Centers for Disease Control has specific performance measures that are applied to program impact.

Table of Contents Investigations Unit

| | |
|--|---|
| Administration, Investigations Unit, Public Health (Program 262) | 1 |
| Professional & Occupational License Investigations (Program 178) | 3 |
| Program Evaluation & Review (Program 262)..... | 5 |
| Special Investigation Unit (Program 262) | 7 |

DHHS Program Data and Information Form Investigations Unit

Date: September 9, 2014

Prepared by: Robert Semerena

Contact #: 471-4964

1. Program name, mission, description, history

Administration, Investigations Unit, Division of Public Health (Program 262)

Mission: Investigations Unit Administration.

Description: Responsible of the Unit management, direction, oversight and accountability.

History: The Investigations Division Administrator position was established with the creation of HHSS in 1997. The Investigations Division later became the Investigations Unit in DHHS. Prior to 1997, management was the responsibility of the Administrator of the Regulatory Compliance Investigation Service in the former Nebraska Department of Health.

2. Program manager, phone number: Robert Semerena is the Administrator for the Investigations Unit in the Division of Public Health. Phone number: 471-4964.
3. # of State Employees: 2
4. # of clients served by program: All Nebraskans
5. Total Budget Amount: \$33,905.00
6. Federal Funds: No
7. State General Funds: Yes
\$ 33,905.00
% of budget: 100%
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No

11. Grant awarded by program: No

12. Mandated services

State No

Statute citation:

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program: No

14. Additional information: None

DHHS Program Data and Information Form Investigations Unit

Date: September 9, 2014

Prepared by: Robert Semerena

Contact #: 471-4964

1. Program name, mission, description, history

Professional & Occupational License Investigations (Program 178)

Mission: Protection of the Public Health.

Description: Responsible for investigations of licensed, registered or certified health care professionals and persons in related occupations for violations of the Uniform Credential Act, the Controlled Substances Act, and professional practice acts; investigations of unlicensed practice; pre-license investigations.

History: Health care licenses were first implemented in the 1920's.

2. Program manager, phone number: Robert Semerena is the Administrator for the Investigations Unit in the Division of Public Health. Phone number: 471-4964.
3. # of State Employees: 17
4. # of clients served by program: All Nebraskans
5. Total Budget Amount: \$1,858,461.00
6. Federal Funds: No
7. State General Funds: No
8. State Cash Funds: Yes
\$1,858,461.00
% of budget: 100%
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: no

12. Mandated services
State: Yes
Statute citation: 38-1,120
Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: A professional license investigation assessment survey tool is provided to each licensee who has been investigated. Participation is voluntary. Postage is pre-paid. The rate of return is approximately 34%.

14. Additional information: None

**DHHS Program Data and Information Form
Investigations Unit**

Date: September 9, 2014

Prepared by: Robert Semerena

Contact #: 471-4964

1. Program name, mission, description, history

Program Evaluation and Review (Program 262)

Mission: Quality Assurance

Description: Responsible for Quality Assurance audits of food stamp issuances and food stamp program procedures; audits Child Support determinations for quality performance; designs and implements a Medicaid Pilot program each year to test and improve Medicaid Quality Assurance. Partners with the Medicaid and Economic Assistance programs, and with the Child Support Administration to assist in corrective action as indicated.

History: Food stamp audits for Quality Control began in 1962; the Medicaid Pilot program for Medicaid Quality Control began in 1996; Child Support Quality Control began in 1997.

2. Program manager, phone number: Robert Semerena is the Administrator for the Investigations Unit in the Division of Public Health. Phone number: 471-4964.
3. # of State Employees: 14
4. # of clients served by program: All Nebraskans
5. Total Budget Amount: \$851,454.00
6. Federal Funds: Yes
\$ 425,386.00
% of budget: 50%
7. State General Funds: Yes
\$ 426,068.00
% of budget: 50%
8. State Cash Funds: No

9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: No
Statute citation:
Federal: Yes
Oversight agency: Dept. of Agriculture; Centers for Medicare and Medicaid;
Social Security Administration
Regulation citation: 7 CFR Part 275; 42 CFR Part 431; Section 454(15) of the
Social Security Act 45 CFR 308.1
13. Evidence-based performance assessment process in place by program: Yes

Describe: Federal re-review of Food Stamp Quality Assurance determinations by
the Dept. of Agriculture; pre-Medicaid Pilot approval and results review by CMS.
14. Additional information: None

DHHS Program Data and Information Form Investigations Unit

Date: September 9, 2014

Prepared by: Robert Semerena

Contact #: 471-4964

1. Program name, mission, description, history

Special Investigation Unit (Program 262)

Mission: Prevention and prosecution of fraud.

Description: Responsible for the investigation of recipient fraud in all public assistance programs such as Food Stamps, ADC, TANF, AABD, energy and other entitlement programs; Medicaid recipient fraud; Child Care provider fraud; employee fraud and special internal investigations; special external investigations; pre-benefit issuance investigations.

2. Program manager, phone number: Robert Semerena is the Administrator for the Investigations Unit in the Division of Public Health. Phone number: 471-4964.
3. # of State Employees: 9
4. # of clients served by program: All Nebraskans
5. Total Budget Amount: \$546,102.00
6. Federal Funds: Yes
\$ 364,841.00
% of budget: 67%
7. State General Funds: Yes
\$181,261.00
% of budget: 33%
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No

11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: 68-1017; 68-720
Federal: Yes
Oversight agency: Dept. of Agriculture
Regulation citation: Chapter 7, Section 273.16 of the CFR.
13. Evidence-based performance assessment process in place by program: No
14. Additional information: None

DHHS Division of Public Health
Licensure Unit Program Data and Information Form

Table of Contents
Licensure Unit

| | |
|---|----|
| Administration of the Board of Health (Program 262)..... | 1 |
| Center for Nursing (Program 262)..... | 3 |
| Certificate of Need (Program 262) | 5 |
| Credentials Review (407 Process) (Program 262)..... | 7 |
| Drug & Alcohol Testing Device Regulation Program (Program 262) | 9 |
| Health Care Facilities & Services Licensure & Certification..... | 11 |
| Licensure of Agencies, Facilities & Programs that Provide Care to Children (Program 262) | 14 |
| Nurse Student & Faculty Loans (Program 262) | 16 |
| Professional & Occupational Credentialing (Programs 178 & 262) | 18 |

**DHHS Division of Public Health
Licensure Unit Program Data and Information Form**

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: Program 262, Administration of the Board of Health

Description: This program administers activities associated with the Board of Health to promote and protect the health and safety of all people in Nebraska, including appointing persons to 24 professional credentialing boards; approving regulations governing professional and occupational credentialing; and conducting credentials reviews, commonly known as the 407 process.

History: The Board of Health was created in state statutes in 1953. Originally, it served as the over site entity for the then State Department of Health. Currently, the Board of Health serves in an advisory role to the Division of Public Health with specific statutory functions relating to the credentialing of health professions, including appointing persons to 24 professional licensure boards and reviewing proposals for either the creation of licensure, certification, or registration for new professions or expansion in the scopes of practice of professions that are already licensed, certified, or registered.

2. Program manager, phone number

Matthew Gelvin is the Program Manager for the Administration of the Board of Health Program. His telephone number is 471-6515.

3. # of State Employees

There are 1.75 full time equivalents in this program.

4. # of clients served by program: **Not Applicable**

5. Total Budget Amount \$104,054

6. Federal Funds No
\$
% of budget

7. State General Funds No
\$104,054
% of budget: 100%

8. State Cash Funds No
 \$
 % of budget

9. Specified Tax Source **Not Applicable**

 Name
 \$ Amount

10. Contract with private providers for services No

 # Providers
 \$ contracted
 # Clients served

11. Grant awarded by program No

 # Grantees
 \$ Grants
 # Clients served

12. Mandated services

 State No
 Statute citation: Neb. Rev. Stat. §§ 71-2601 to 71-2611
 Federal No
 Oversight agency:
 Regulation citation:

13. Evidence-based performance assessment process in place by program

 No

 Describe:

14. Additional information:

**DHHS Division of Public Health
Licensure Unit Program Data and Information Form**

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: Program 262, Center for Nursing

Description: This program addresses issues of supply and demand for nurses including issues of recruitment, retention, and utilization of nurses.

History: The Nebraska Center for Nursing Act was created in state statutes in 2000.

2. Program manager, phone number

Karen Bowen is the Program Manager for the Center for Nursing Program. Her telephone number is 471-4376.

3. # of State Employees: None

4. # of clients served by program: **Not Applicable**

5. Total Budget Amount

\$61,729, the source of which is nursing licensure fees, as authorized in Neb. Rev. Stat. § 71-1798.01. This statute authorizes the Board of Nursing to annually recommend to the Department of Health and Human Services the percentage of all nursing fees that are to be used to cover the cost of the Nebraska Center for Nursing, except that the percentage shall not be greater than 15% of the biennial revenue derived from the fees.

6. Federal Funds No
 \$
 % of budget

7. State General Funds No
 \$
 % of budget

8. State Cash Funds Yes
 \$61,729
 % of budget: 100%

9. Specified Tax Source **Not Applicable**

Name

\$ Amount

10. Contract with private providers for services No

Providers

\$ contracted

Clients served

11. Grant awarded by program No

Grantees

\$ Grants

Clients served

12. Mandated services

State Yes

Statute citation: Neb. Rev. Stat. §§ 71-1796 to 71-17,100

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program

No

Describe:

14. Additional information:

**DHHS Division of Public Health
Licensure Unit Program Data and Information Form**

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: Program 262, Certificate of Need

Description: This program administers the Nebraska Health Care Certificate of Need Act.

History: The Nebraska Health Care Certificate of Need Act was created in 1979. Originally, this Act required a certificate of need for any expansion in healthcare facilities, including hospitals, which exceeded \$1 million. Over time, the Act has been amended several times, most recently in 2009. Currently, the Act only applies to rehabilitation hospitals and nursing homes and it places a moratorium on the creation of new beds and only allows the relocation of these type beds under certain conditions.

2. Program manager, phone number

Heidi Burklund is the Program Manager for the Certificate of Need Program. Her telephone number is 471-4963.

- 3. # of State Employees: None
- 4. # of clients served by program: None

5. Total Budget Amount: None

6. Federal Funds No
 \$
 % of budget

7. State General Funds No
 \$
 % of budget

8. State Cash Funds No
 \$
 % of budget

9. Specified Tax Source **Not Applicable**

Name
\$ Amount

10. Contract with private providers for services No

Providers
\$ contracted
Clients served

11. Grant awarded by program No

Grantees
\$ Grants
Clients served

12. Mandated services

State Yes

Statute citation: Neb. Rev. Stat. § 71-5801 to 71-5870

Federal No

Oversight agency:

Regulation citation:

13. Evidence-based performance assessment process in place by program

No

Describe:

14. Additional information:

DHHS Division of Public Health, Licensure Unit Program Data and Information Form

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: **Program 262, Credentialing Review (407 Process)**

Description: This program reviews professions and occupations that wish to be credentialed or which seek changes in scope of practice.

History: The Nebraska Regulation of Health Professions Act was created by LB407, 1985 and it has been codified into Neb. Rev. Stat. §71-6201 to 71-6229.

2. Program manager, phone number

David Montgomery is the Program Manager for the Credentialing Review (407 Process). His telephone number is 471-6515.

3. # of State Employees

There are 2 full time equivalents in this program.

4. # of clients served by program: **Not Applicable**

5. Total Budget Amount

\$257,681

6. Federal Funds No
 \$
 % of budget

7. State General Funds No
 \$
 % of budget

8. State Cash Funds Yes
\$257,681
% of budget: 100%
9. Specified Tax Source **Not Applicable**
Name
\$ Amount
10. Contract with private providers for services No
Providers
\$ contracted
Clients served
11. Grant awarded by program No
Grantees
\$ Grants
Clients served
12. Mandated services
State Yes
Statute citation: Neb. Rev. Stat. §§ 71-6201 to 71-6229
Federal No
Oversight agency:
Regulation citation:
13. Evidence-based performance assessment process in place by program
No
Describe:
14. Additional information:

DHHS Division of Public Health, Licensure Unit Program Data and Information Form

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: **Program 262, Drug and Alcohol Testing Device Regulation Program**

Description: This program regulates Chemical and Breath Testing Devices.

History:

The statutes pertaining to driving under the influence, including the requirement for law enforcement officers to conduct breath alcohol testing have been codified into Neb. Rev. Stat. §§60-6,196 to 60-6,204.

The statutes pertaining to drug and alcohol testing in the work place have been codified into Neb. Rev. Stat. §§ 48-1901 to 48-1910.

The Division of Public Health is authorized by these statutes to develop rules and regulations governing alcohol testing devices and procedures and works with the Department of Motor Vehicles and other stakeholders regarding the development and enforcement of such regulations.

2. Program manager, phone number

Kris Chiles is the Program Manager for the Drug and Alcohol Testing Device Regulation Program. Her telephone number is 471-0185.

3. # of State Employees

There is 0.5 full time equivalent in this program.

4. # of clients served by program

There are 25,797 persons served by this program.

5. Total Budget Amount

\$9,074

6. Federal Funds No
 \$
 % of budget
7. State General Funds Yes
 \$9,074
 % of budget: 100%
8. State Cash Funds No
 \$
 % of budget
9. Specified Tax Source **Not Applicable**
 Name
 \$ Amount
10. Contract with private providers for services No
 # Providers
 \$ contracted
 # Clients served
11. Grant awarded by program No
 # Grantees
 \$ Grants
 # Clients served
12. Mandated services
 State Yes
 Statute citation: Neb. Rev. Stat. §§ 48-1901 to 48-1910
 Federal No
 Oversight agency:
 Regulation citation:
13. Evidence-based performance assessment process in place by program
 No

 Describe:
14. Additional information:

**DHHS Division of Public Health
Licensure Unit Program Data and Information Form**

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: Program 262, Health Care Facilities and Services Licensure and Certification

Description: This program licenses and certifies facilities and services to provide healthcare services in inpatient, outpatient, residential and in-home settings. A list is below of the health care facilities and services encompassed in this program.

History: The exact date as to when the licensure of healthcare facilities began in Nebraska is unknown. However, records indicate that some form of licensure began in 1965. A comprehensive rewrite of laws governing the licensure of healthcare facilities occurred in the late 1990s and resulted in the creation of the Health Care Facility Licensure Act. This Act was passed into law as LB 819, 2000 and it has been codified into Neb. Rev. Stat. § 71-401 to 71-464. The Act became operative January 1, 2001.

2. Program manager, phone number

There are five Program Managers for the Health Care Facilities and Services Licensure and Certification Program in the Licensure Unit in the Division of Public Health.

| | |
|------------------|----------|
| Sheryl Mitchell- | 471-4975 |
| Diana Meyer - | 471-3484 |
| Pamela Kerns- | 471-3651 |
| Eve Lewis- | 471-3324 |
| Heidi Burklund- | 471-4963 |

3. # of State Employees

There are 72.26 full time equivalents in this program.

4. # of clients served by program

There are **6,161** facilities and services licensed and/or certified in this program.

5. Total Budget Amount \$6,616,445

6. Federal Funds Yes
\$4,490,901

% of budget: 68%

7. State General Funds Yes

\$483,222

% of budget: 7%

8. State Cash Funds Yes

\$1,642,322

% of budget: 25%

9. Specified Tax Source **Not Applicable**

Name

\$ Amount

10. Contract with private providers for services No

Providers

\$ contracted

Clients served

11. Grant awarded by program No

Grantees

\$ Grants

Clients served

12. Mandated services

State Yes

Statute citation: Neb. Rev. Stat. §§ 71-401 to 71-464

Federal Yes

Oversight agency: Centers for Medicare and Medicaid Services

Regulation citation: Regulations for Health Care Facilities and Services

Licensure Program are codified in Title 175 Chapters 1 to 19.

13. Evidence-based performance assessment process in place by program

No

Describe:

14. Additional information:

Program: Health Care Facilities and Services Licensure and Certification

| | Licensed Totals | Certified Totals |
|--|--------------------|---------------------|
| Adult Day Services | 47 | |
| Assisted-Living Facilities | 283 | |
| Centers for Developmental Disabilities | 138 | |
| Children's Day Health Services | 5 | |
| Community Mental Health Centers | 1 | |
| Comp. Outpatient Rehab. Facility | | 0 |
| Developmentally Disabilities Waivers | | 1,205 |
| Health Clinics | 8 | |
| Abortion Services | 3 | |
| Ambulatory Surgical Centers | 48 | 47 |
| ESRD's | 37 | 36 |
| Labor and Delivery | 1 | |
| Public Health Clinic | 17 | |
| Health Maintenance Organizations | | 7 |
| Home Health Agency | 131 | 76 |
| Hospice | 43 | 42 |
| Hospitals: | | |
| General Acute | 34 | 34 |
| Critical Access | 65 | 65 |
| Psychiatric | 4 | 2 |
| Rehabilitation | 1 | 1 |
| ICF/MR's | 14 | |
| Laboratories | | 2,068 |
| Mental Health Centers | 33 | |
| Nursing Homes: | | |
| Nursing Facilities (NF) | 20 | |
| Skilled Nursing Facility (SNF Only) | 1 | |
| Skilled Nursing Facility (SNF/NF) | 197 | |
| Nursing Homes/LTCH (Licensure Only) | 10 | |
| Outpatient PT/SP | | 6 |
| Pharmacies | 517 | |
| Portable X-Ray | | 2 |
| Psychiatric Residential Treatment Facilities | | 7 |
| Respite Care Services | 1 | |
| Rural Health Clinics | | 133 |
| Substance Abuse Treatment Centers | 117 | |
| Wholesale Drug Distributor | 654 | |
| Totals | 2,430 | 3,731 |

Grand Total of Active Licensed and Certified as of 8/1/14

6,161

**DHHS Division of Public Health
Licensure Unit Program Data and Information Form**

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: Program 262, Licensure of Agencies, Facilities, and Programs that provide Care to Children.

Description: This program licenses child care programs, child caring agencies, child placing agencies and group homes. Below is a list of facilities encompassed in this program.

History: The licensure of entities that provide care to children dates back to 1943. These statutes have been amended over time and now include a Child Care Licensing Act which was passed into law as LB 130 in 1984. This Act has been codified into Neb. Rev. Stat. §71-1908 to 71-1923. Statues governing the licensure of group homes, child caring agencies, and child placing agencies have been codified into Neb. Rev. Stat. §71-1901 to 71-1906.01.

2. Program manager, phone number

Pat Urzedowski is the Program Manager for the Licensure of Agencies, Facilities and Programs that provide Care to Children in the Licensure Unit of the Division of Public Health. Her telephone number is 471-9431.

3. # of State Employees

There are 36 full time equivalents in this program.

4. # of clients served by program

There are **3,262** Agencies, Facilities and Programs that are credentialed by this program as of 8/1/14.

5. Total Budget Amount

\$2,138,464

6. Federal Funds Yes
 \$1,861,129
 % of budget: 87%

7. State General Funds No
 \$
 % of budget

8. State Cash Funds Yes
 \$277,335
 % of budget: 13%

9. Specified Tax Source **Not Applicable**
 Name
 \$ Amount

10. Contract with private providers for services No
 # Providers
 \$ contracted
 # Clients served

11. Grant awarded by program No
 # Grantees
 \$ Grants
 # Clients served

12. Mandated services
 State Yes
 Statute citation: Neb. Rev. Stat. §§ 71-1908 to 71-1923 and
 Neb. Rev. Stat. §§ 71-1901 to 71-1906.01
 Federal No
 Oversight agency:
 Regulation citation:

13. Evidence-based performance assessment process in place by program
 No
 Describe:

14. Additional information:

Program: Licensure of Agencies, Facilities and Programs that provide Care to Children (active)

| | Licensed Totals |
|--|------------------------|
| Child Care Centers | 652 |
| Family Child Care Homes I | 1,744 |
| Family Child Care Homes II | 600 |
| Preschools | 195 |
| Child Caring Agency | 30 |
| Child Placing Agency | 32 |
| Group Home | 0 |
| Residential Child-Caring Agency | 9 |
| Grand Total Active Licensed as of 8/01/14 | 3,262 |

DHHS Division of Public Health, Licensure Unit Program Data and Information Form

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

1. Program name, mission, description, history

Name: **Program 262, Nurse Student and Faculty Loans**

Description: This program funded nurse student and faculty loans. Five hundred and fourteen \$1,000 Nurse Student Loans were issued between 2001 to 2004 for a total of \$514,000. Nineteen \$5,000 Nurse Faculty Loans were issued between 2006 to 2009 for a total of \$95,000.

History: The Nursing Student Loan Act was created by LB 468, 2001 and has been codified into Neb. Rev. Stat. §71-17,101 to 71-17,107. The Nursing Faculty Student Loan Act was created by LB 146, 2005 and has been codified into Neb. Rev. Stat. §71-17,108 to 71-17,116.

The source of funding for nurse student loans was General Funds and no such funds are currently authorized; therefore no loans are being provided.

The source of funding for nurse faculty loans may consist of grants, private donations, nurse licensure fees, and loan repayments. The statute (71-17,113) authorizes the Department of HHS to, beginning January 1, 2006 through December 31, 2007, charge a fee of one dollar, in addition to any other fee, for each license renewal for a registered nurse or license practical nurse for crediting to the Nurse Faculty Student Loan Cash Fund.

2. Program manager, phone number

Karen Bowen is the Program Manager for the Nurse Student and Faculty Loans Program in the Licensure Unit in the Division of Public Health. Her telephone number is 471-4376.

3. # of State Employees

There is 0.5 full time equivalent in this program.

4. # of clients served by program

There are approximately 533 persons served by this program.

5. Total Budget Amount

\$1,056

DHHS Division of Public Health Licensure Unit Program Data and Information Form

Date: September 11, 2014
Prepared by: Becky Wisell
Contact # 471-0179

The Mission for all of the Licensure Unit's Programs is the Protection of the public's health, safety and wellbeing through regulation of individuals, facilities and programs.

1. Program name, mission, description, history

Name: Programs 178 and 262, Professional and Occupational Credentialing

Description: This program credentials persons by issuance, renewing, reinstating licenses, certificates and registrations which authorize the provision of health or health-related services. Additionally, this program investigates complaints and disciplines credential holders for violating statutes and regulations governing their professions/occupations. Funding from this program is allocated to the Division of Public Health-Investigation Unit to fund complaint investigations and associated activities. A list is below of professions and occupations encompassed in this program.

History: The first regulation of health professions in the United States began in 1639 when the Commonwealth of Virginia enacted a medical practice act. Although there is conflicting information as to which profession was first regulated in Nebraska since some information indicates that medicine was the first health profession to be regulated starting in 1881 and that pharmacy was the first to be regulated in 1887, there is agreement that the regulation of health professions began in Nebraska in the 1800s.

Nebraska established a Uniform Licensure Law in 1927 and overtime that Law was amended several times, with a comprehensive rewrite and re-codification into a Uniform Credentialing Act by LB 463, 2007, which had an operative date of December 1, 2008.

2. Program manager, phone number

There are four Program Managers for the Professional and Occupational Credentialing Program in the Licensure Unit in the Division of Public Health.

| | |
|--------------|----------|
| Vacant- | 471-4915 |
| Karen Bowen- | 471-4376 |
| Kris Chiles- | 471-0185 |
| Rene' Tiedt- | 471-0547 |

3. # of State Employees

There are 42.74 full time equivalents in this program.

4. # of clients served by program

There are 609,929 persons credentialed (active/inactive status) in the program.

5. Total Budget Amount \$4,560,284

6. Federal Funds No
\$
% of budget

7. State General Funds Yes
\$98,705
% of budget: 2%

8. State Cash Funds Yes
\$4,461,579
% of budget: 98%

9. Specified Tax Source **Not Applicable**
Name
\$ Amount

10. Contract with private providers for services No
Providers
\$ contracted
Clients served

11. Grant awarded by program No
Grantees
\$ Grants
Clients served

12. Mandated services
State Yes
Statute citation: Neb. Rev. Stat. §§ 38-101 to 38-1,140
Federal No
Oversight agency: Division of Public Health-Licensure Unit
Regulation citation: Regulations for Professional and Occupational Credentialing
are codified in Title 172 Chapters 1 to 180

13. Evidence-based performance assessment process in place by program
No
Describe:

14. Additional information:

| Program: Professional and Occupational Credentialing | Active | Inactive | Total (active + inactive) |
|---|---------|----------|---------------------------|
| Alcohol & Drug Counseling | 1,058 | 1,257 | 2,315 |
| Asbestos | 889 | 10,401 | 11,290 |
| Assisted-Living Administrator | 986 | 1 | 987 |
| Athletic Training | 390 | 328 | 718 |
| Audiology/Speech-Language Pathology | 1,140 | 2,104 | 3,244 |
| Body Art | 564 | 596 | 1,160 |
| Cancer Drug Repository Program | 70 | 10 | 80 |
| Chiropractor | 665 | 706 | 1,371 |
| Cosmetology | 12,700 | 47,393 | 60,093 |
| Crematory | 26 | 3 | 29 |
| Dentistry | 4,802 | 4,987 | 9,789 |
| Emergency Medical Care | 8,225 | 29,367 | 37,592 |
| Environmental Health Specialist | 70 | 528 | 598 |
| Funeral Directing | 699 | 2,051 | 2,750 |
| Hearing Aid Instrument Dispenser/Fitter | 120 | 1,224 | 1,344 |
| Lead | 213 | 669 | 882 |
| Massage Therapy | 1,910 | 4,008 | 5,918 |
| Medical Nutrition Therapist | 576 | 501 | 1,077 |
| Medicine | 11,119 | 25,284 | 36,403 |
| Mental Health Practice | 8,000 | 9,695 | 17,695 |
| Nail Technology | 1,418 | 3,768 | 5,186 |
| Nursing | 38,631 | 69,093 | 107,724 |
| Nursing Home Administrator | 570 | 2,920 | 3,490 |
| Nursing Support | 54,328 | 157,545 | 211,873 |
| Occupational Therapy | 2,786 | 1,889 | 4,675 |
| Optometry | 875 | 867 | 1,742 |
| Pharmacy | 10,905 | 13,868 | 24,773 |
| Physical Therapy | 2,590 | 6,329 | 8,919 |
| Podiatry | 101 | 197 | 298 |
| Psychology | 689 | 1,782 | 2,471 |
| Radiography | 2,796 | 5,063 | 7,859 |
| Radon | 373 | 300 | 673 |
| Respiratory Care | 1,250 | 2,194 | 3,444 |
| Swimming Pool Operator | 2,105 | 12,494 | 14,599 |
| Veterinary Medicine | 1,761 | 2,607 | 4,368 |
| Water Operator | 5,514 | 4,845 | 10,359 |
| Well Driller | 880 | 1,261 | 2,141 |
| Grand Total Credentialed as of 8/1/14 | 181,794 | 428,135 | 609,929 |

Table of Contents
Lifespan Health Services Unit

| | |
|---|----|
| Abstinence Education | 1 |
| Breast & Cervical Cancer Screening | 3 |
| CISS-SECCS Planning (Together for Kids and Families) | 5 |
| Colon Cancer Screening | 7 |
| Commodity Supplemental Food Program (CSFP) | 9 |
| Immunization Program including Vaccines for Children (VFC) | 11 |
| Maternal, Child and Adolescent Health (MCAH)..... | 13 |
| MCH Assessment & Evaluation | 15 |
| N-MIECHV (Nebraska Maternal Infant Early Childhood Home Visiting)..... | 17 |
| Nebraska Early Hearing Detection & Intervention Program..... | 20 |
| Nebraska Elemental Food Reimbursement Program..... | 22 |
| Nebraska Newborn Screening & Genetics Program..... | 24 |
| Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS) | 27 |
| Personal Responsibility Education Program (PREP) | 29 |
| Planning and Support..... | 31 |
| Public Health Screening..... | 34 |
| Reproductive Health Program..... | 36 |
| State Systems Development Initiative | 38 |
| TANF: Services for Women Who are Pregnant or Believe They are Pregnant | 40 |
| The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) | 42 |
| Unit Administration, Lifespan Health Services Unit..... | 44 |
| WISEWOMAN..... | 46 |
| Women’s and Lifespan Health Initiative..... | 48 |

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting and Michaela Meismer

Contact #: 402-471-0196

1. Program name, mission, description, history

Abstinence Education

Mission: Deliver abstinence education to Nebraska youth through local sites.

Description: Three Subgrants are issued to deliver abstinence education activities in accordance with federal guidelines.

History: The Nebraska Abstinence Education program was re-established in 2010. It is supported by a 2010 federally-approved state plan, identifying risk of unintended pregnancy, particularly among youth at-risk for poor outcomes including youth in state custody and youth in foster care.

2. Program manager: Michaela Meismer, Adolescent Health Program Manager I.
3. # of State Employees: This funding source accounts for 0.3 FTE of the Adolescent Health program manager position.
4. # of clients served by program: Approximately 3,000 youth encounters annually. Local sites deliver direct educational services of varying duration (some single event; some extended curricula, meeting weekly).
5. Total Budget Amount: \$229,135 in 2013
6. Federal Funds: Yes
\$221,214
% of Budget: 100%
Note there is a match-requirement met by local project sub-grantees
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No

10. Contract with private providers for services: No.
11. Grant awarded by program: Yes – three sub-grantees delivering local abstinence education activities.
12. Mandated services:
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: No.
- Describe: Sub-grantees report activities, demographics of youth served, and expenditures. Medically accurate information is a federal funder requirement; however, there is no requirement to deliver evidence-based programming.
14. Additional information:
http://dhhs.ne.gov/publichealth/Pages/LifespanHealth_Adolescenthealth_index.aspx

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eurek with Melissa Leypoldt

Contact #: 402-471-0196

1. Program name, mission, description, history

Breast and Cervical Cancer Screening

Mission: Provides early detection of breast and cervical cancer for eligible women.

Description: Grounded in Public Law 101-354, this program provides breast and cervical cancer screening to uninsured or underinsured women at or below 225% of federal poverty guidelines. The funding also supports patient navigation, data collection and tracking, public education and outreach, provider education, and an evaluation to measure the clinical outcomes, costs, and effectiveness of the program.

History: This program was first funded in 1992 by the Centers for Disease Control and Prevention. A bill for breast and cervical cancer screening was passed in the Nebraska Legislature in 1991 (Nebraska Revised Statute §§ 71-7001.01 through 71-7013).

2. Program manager, phone number: Melissa Leypoldt, RN. (402) 471-0314
3. # of State Employees: 12.65
4. # of clients served by program: 10,000 women are projected to be served during the current fiscal year
5. Total Budget Amount: \$3,106,281
6. Federal Funds: Yes
\$2,681,281
% of budget: 86%
7. State General Funds: Yes
\$325,000
% of budget: 10%

8. State Cash Funds: Yes
\$100,000
% of budget: 4%

9. Specified Tax Source: No

10. Contract with private providers for services: Yes
Providers: 800
\$ contracted: \$700,391
Clients served: 6,200

11. Grant awarded by program: No

12. Mandated services
State: No
Federal: No
Oversight agency: Centers for Disease Control and Prevention
Regulation citation:

13. Evidence-based performance assessment process in place by program: Yes

Describe: The Centers for Disease Control and Prevention requires semi-annual data submissions and evaluates the program according to established standards.

14. Additional information: None

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting and Tiffany Mullison

Contact #: 402-471-0196

1. Program name, mission, description, history

CISS-SECCS Planning (Together for Kids and Families)

Mission: Together for Kids and Families deploys systems-level collaborations to advance statewide strategic and systemic approaches to improving early childhood outcomes.

Description: Historically, in accordance with federal grant guidelines over the past 10 years, this program coordinated an interagency strategic plan for early childhood activities and facilitates the implementation of the plan. Today, with recent renewal of award for an additional three-year period, Together for Kids and Families takes the developed systems-level framework and mobilizes partners and other stakeholders to achieve collective impact to specifically improve recognition, prevention, and mitigation of *toxic stress in early childhood*.

History: Two initial five-year grant cycles had previously been awarded to the Nebraska Department of Health & Human Services since 2003. This program is funded through the State Early Childhood Comprehensive Systems (SECCS) Grant Program, administered by the Maternal and Child Health Bureau, and the U.S. Department of Health and Human Services.

2. Program manager: Program Coordinator Tiffany Mullison supervised by Kathy Karsting, RN, MPH, Program Manager II.
3. # of State Employees: 1.0 FTE
4. # of clients served by program: This program does not provide direct services to clients. The program constituency is comprised of a significant network of early childhood care and education providers and practitioners; state and local program leadership, including foundations and non-profit organizations.
5. Total Budget Amount: \$140,000 annually
6. Federal Funds: Yes
\$140,000

% of Budget: 100%

7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No. In 2013, the program has initiated or will initiate contracts with organizations as follows:
 - UNL Regents Center on Children, Families and the Law to create a web-based application called “Early Childhood Community Link,” an interactive searchable feature to identify early childhood initiatives statewide;
 - UNL Regents Center on Children Families and the Law to create on-demand web-based messaging on the issue of toxic stress in early childhood for audiences of child care providers, home visitors, and foster care providers;
 - The Child Trauma Academy for speaker services for a statewide conference on toxic stress in early childhood;
 - The Panhandle Partnership for evaluation of a collective impact initiative to introduce an evidence-based model for parent education and support in a pilot region of Nebraska.
11. Grant awarded by program: No
12. Mandated services:
 - State: No
 - Federal: No
13. Evidence-based performance assessment process in place by program: Yes.

Describe: In 2013, federal funding requirements include a data-driven evaluation plan for assessment of collective impact initiative, as well as measureable indicators of meeting the approved project plan. Program activities incorporate data support with the MCH epidemiologist, and program expectations for evidence-based program models delivered with fidelity are followed.
14. Additional information:
<http://dhhs.ne.gov/publichealth/MCAH/Pages/TogetherForKids.aspx>

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eureka with Melissa Leypoldt

Contact #: 402-471-0196

1. Program name, mission, description, history

Colon Cancer Screening

Mission: Provide colon cancer screening services to eligible uninsured or underinsured men and women aged 50-64 years and support population-based screening efforts.

Description: The program supports screening and diagnostic follow-up care, patient navigation, data collection and tracking, public education and outreach, provider education, and an evaluation to measure the clinical outcomes, costs, and effectiveness of the program.

History: The program was first funded in 2005 by the Centers for Disease Control and Prevention as one of five demonstration grants.

2. Program manager, phone number: Michelle Heffelfinger (402) 471-0595
3. # of State Employees: 1.95
4. # of clients served by program: 11,500 projected to be served in the current fiscal year
5. Total Budget Amount: \$1,375,000
6. Federal Funds: Yes
\$930,000
% of budget: 68%
7. State General Funds: Yes
\$400,000
% of budget: 29%
8. State Cash Funds: Yes
\$45,000

% of budget: 3%

9. Specified Tax Source: No

10. Contract with private providers for services: Yes

Providers: 800

\$ contracted: \$40,000

Clients served: 11,500

11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

Oversight agency: Centers for Disease Control and Prevention

13. Evidence-based performance assessment process in place by program: Yes

Describe: The Centers for Disease Control and Prevention requires semi-annual data submissions and evaluates the program according to established standards.

14. Additional information: None

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eurek with Barb Packett

Contact #: 402-471-0196

1. Program name, mission, description, history

Commodity Supplemental Food Program (CSFP)

Mission: The Commodity Supplemental Food Program (CSFP) mission is to provide iron and protein rich foods to low-income pregnant women, breastfeeding and postpartum mothers, children, and seniors over the age of 60.

Description: Distribution of USDA provided commodity foods to low income women, infants, children, and seniors; 8 local agencies distribute foods at 21 sites statewide. Income eligibility for seniors is at or below 130% of poverty level; for women, infants, and children, it is at or below 185% of poverty.

History: CSFP was established by Congress in 1969.

2. Program manager, phone number: Barb Packett, NE DHHS Food Distribution Coordinator (402) 471-0189
3. # of State Employees: 0.7
4. # of clients served by program: 10,300 monthly
5. Total Budget Amount: \$808,076 FFY2014
6. Federal Funds: yes
\$808,076
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No

11. Grant awarded by program: Yes

Grantees: 8

\$ Grants: \$739,502

Clients served: 10,300 monthly

12. Mandated services

State: No

Statute citation: (71-2225 to 71-2230 authorizes program)

Federal: No

Oversight agency: United States Department of Agriculture (USDA)

Regulation citation: CFR 246 and 250

13. Evidence-based performance assessment process in place by program: No

Describe:

14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Sara Morgan

Contact #: 402-471-0196

1. Program name, mission, description, history

Immunization Program including Vaccines for Children (VFC)

Mission: Protecting children and families from vaccine-preventable diseases.

Description: The Immunization and Vaccines for Children Program (VFC) is funded by federal grants from the Centers for Disease Control and Prevention to implement and maintain an immunization program for eligible Nebraska children from birth through 18 years of age. Eligible children include those that are Medicaid eligible, uninsured, underinsured (their insurance specifically excludes vaccine coverage), and/or American Indian/Alaska Native children. Program activities include distributing publicly-funded vaccines to participating providers, providing immunization training on vaccines and vaccine management, conducting quality assurance procedures with enrolled providers, maintaining and enhancing the Nebraska State Immunization Information System (NESIIS), conducting surveillance of vaccine-preventable diseases, participating in activities related to perinatal hepatitis B prevention, and assessing immunization coverage levels. In addition, the CDC provides funding to conduct similar program activities as they relate to eligible adults. Eligible adults include persons 19 years of age and older who are uninsured or underinsured.

History: The Immunization Program has been in existence since the 1960s with the Vaccines for Children Program beginning in 1993.

2. Program manager, phone number: Sara Morgan, 402-471-2139
3. # of State Employees: 8.55 (with two additional UNL contract employees)
4. # of clients served by program: approximately 415,000 doses/year
5. Total Budget Amount: \$2,624,980
6. Federal Funds: Yes
\$2,186,638

% of budget: 100% of operating budget; 83% of total budget

7. State General Funds: Yes
\$370,579
% of budget: 14% (vaccine purchase only)
8. State Cash Funds: Yes
\$67,763
% of budget: 3% (revenue is from vaccine reimbursement payments from providers who wasted VFC vaccines. Cash can be used for vaccine purchase only.)
9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers 2
\$ contracted: \$250,800
Clients served: IT support for Nebraska State Immunization Information System (NESIIS); prepare and mail Governor's Hallmark Congratulatory and Immunization Card to all new parents in Nebraska.
11. Grant awarded by program: Yes
Grantees 24
\$ Grants \$ \$783,289
Clients served: Approximately 55,000 of the total vaccine doses
12. Mandated services
State: Yes
Statute citation: Section 71-526 to 71-530
Federal: Yes
Oversight agency: Centers for Disease Control and Prevention – National Center for Immunization and Respiratory Disease
Regulation citation: PH 5, 42 USC, SEC 247B
13. Evidence-based performance assessment process in place by program: Yes
Describe: At the state level, the program submits multiple reports to CDC (annual and interim), participates in Program Evaluation with CDC, participates in regular conference calls with CDC, and hosts the annual CDC on-site review. The state also submits required financial- and audit-required reporting, such as the annual Financial Status Report (SF-269). At the local level, all providers participate in quality assurance reviews which determine immunization coverage rates for patients and identifies barriers to increasing those rates (i.e. access, reminder/recall efforts, etc.).
14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting

Contact #: 402-471-0196

1. Program name, mission, description, history

Maternal Child Adolescent Health (MCAH)

Mission: Supporting holistic life course development: pregnancy through young adulthood.

Description: The multidisciplinary team comprised of 8.54 FTE total includes 5.19 positions funded by MCH Title V federal funds, including the Supervisor/Program Manager II position overseeing the team's responsibilities.

The focus of the team collectively is to identify and address priorities and disparities with life course significance in the maternal, child, and adolescent populations of Nebraska.

History: The Maternal and Child Health (MCH) Services Block Grant was created in 1981, consolidating under Title V of the Social Security Act seven former categorical child health programs into a single program of formula grants to States supported by a Federal special projects authority. This program area receives funding through Nebraska's MCH Block grant to support the Nebraska activities under the purposes of maternal child health performance objectives and Nebraska priorities. Funding of the Maternal-infant health community health nurse, of the school health nurse consultant position, a portion of the adolescent health position, the nursing FTE in greater Nebraska, plus the oversight and support framework (Program Manager II and Administrative Assistant positions) provides a strong cornerstone for the DHHS internal organization of maternal child health program approaches.

2. Program manager: Kathy Karsting, RN, MPH Program Manager II
3. # of State Employees: The entire team is comprised of 11 individuals, inclusive of 8.54 FTE. One FTE of the total is an SOS temporary position.
4. # of clients served by program: Program constituencies vary by activity. No direct clinical services are provided. Registered Nurses in the program area provide consultation and training services for health professionals in order to improve competency of the public health workforce in Nebraska to meet maternal child health

objectives. In the training area, in 2012, the MCAH program issued peer-approved continuing education contact hours to 800+ health professionals statewide.

5. Total Budget Amount: In 2014-2015, projected to be approximately \$611,000 funding level from MCH Title V Block Grant federal funds toward a total program estimated budget of \$5.4 million total funds from all sources for all MCAH team program activities.

6. Federal Funds: Yes
\$611,000
% of Budget: 100% MCH Title V funded portion

7. State General Funds: No

8. State Cash Funds: No

9. Specified Tax Source: No

10. Contract with private providers for services: In 2012-2013 the program issued contracts as follows: UNL Regents Center on Children, Families and the Law to operate a website and listserv application for school health; United Way of the Midlands to operate a toll-free telephone provider-locator service; UNMC College of Public Health Center for Health Disparities for data consultation and services. The MCAH program administered funds from a TANF allocation in 2010-2014 to serve pregnant women and these resources were awarded as a contract to Nebraska Children's Home Society.

11. Grant awarded by program: No

12. Mandated services:
State: No
Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: The program operates using a framework of logic model, objectives, and indicators of progress. The program team emphasizes evidence-based, data-driven best practices in maternal child health practice and policy.

15. Additional information:

<http://dhhs.ne.gov/publichealth/MCAH/Pages/Home.aspx>

http://dhhs.ne.gov/publichealth/Pages/lifespanhealth_adolescenthealth_index.aspx

<http://dhhs.ne.gov/publichealth/MCAH/Pages/MaternalAndInfant.aspx>

<http://dhhs.ne.gov/publichealth/Pages/schoolhealth.aspx>

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Debora Barnes-Josiah

Contact #: 402-471-0196

1. Program name, mission, description, history

MCH Assessment & Evaluation

Mission: Provide high quality data that supports maternal and child health

Program Description: Program includes administrative and technical support for the Child and Maternal Death Review Team as established under Neb. Rev. Stat. 71-3404 through 71-3411. The Nebraska Legislature created the Child Death Review Team (CDRT) in 1993, and added maternal reviews in 2013. The CMDRT reviews the numbers and causes of deaths of children ages 0 to 17, and of women within 12 months of the end of a pregnancy. All deaths are reviewed, not just “suspicious” or violent ones. The goals of these reviews are to:

- Identify patterns of preventable child and maternal death;
- Recommend changes in health care and social services systems' responses to child and maternal deaths;
- Refer any previously unsuspected cases of abuse, malpractice, or homicide to law enforcement; and,
- Report to the public and state policy makers about child and maternal deaths, with recommendations on changes that might prevent future deaths.

Review of maternal deaths will begin in 2015.

The program also includes special studies and analyses of maternal and child health data. This includes annual linkage of Nebraska Medicaid and birth certificate data for federal reports, and comprehensive data reports for 5-year needs assessment. Epidemiologic and data support are provided for other DHHS/Lifespan Health Services Unit programs including PRAMS, Newborn Screening, Immunization, Substance Abuse Prevention, Safe Sleep, and the Birth Defect Registry.

History: Child Death Review Team established in 1993. Maternal death reviews added with the passage of LB361 in 2013.

2. Program manager, phone number: Debora Barnes-Josiah, Ph.D., Nebraska Child Death Review Team Coordinator

Phone: (402) 471-9048

3. # of State Employees: .25 DHHS employees (coordinator is an employee of UNMC)
4. # of clients served by program: NA
5. Total Budget Amount: \$115,084
6. Federal Funds: Yes
\$115,084
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No, but services of coordinator acquired through a contract with UNMC.
11. Grant awarded by program: No
12. Mandated services
State: Yes
Statute citation: Neb. Rev. Stat. Article 34, §71-3406-3411
Federal: No
13. Evidence-based performance assessment process in place by program: No

Describe:
14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting and Jennifer Auman

Contact #: 402-471-0196

1. Program name, mission, description, history

N-MIECHV (Nebraska Maternal Infant Early Childhood Home Visiting)

Mission: The program develops and implements evidence-based home visiting services in order to support parents and improve health, social, behavioral, economic, and educational outcomes for families at risk for poor outcomes.

Description: The program provides planning, implementation, and data system/performance management support for local project delivery within the framework of federally-approved evidence-based home visiting programs and benchmark measures of impact and effectiveness.

History: In 2010, the federal Affordable Care Act made available to states the opportunity for funding in order to establish evidence-based home visiting programs to improve early childhood and family outcomes. As of 2013, Nebraska has been awarded four of an expected five years of funding, plus an additional funding allocation referred to as Competitive Development funds for a two-year period in order to enhance and evaluate program effectiveness.

In addition to the federal funding, in 2012, N-MIECHV was assigned administrative responsibility for state general funds allocated to the operation of home visiting programs for the purpose of reducing risk of child abuse and neglect among at-risk families.

2. Program manager: Program leadership is provided by a designated Program Coordinator, Jennifer Auman. Program operations at the state level are conducted by a management team, comprised of Paula Eurek, Lifespan Health Unit Administrator; Kathy Karsting, RN, MPH Program Manager II; Jennifer Severe-Oforah, MCH Epidemiology Coordinator; Rayma Delaney, MCH Planning and Support.
3. # of State Employees: 1.0 FTE Program Manager, 1.0 FTE Data Analyst, 0.36 MCH Epidemiology Coordinator; 1.0 FTE SOS Community Health Educator Sr.

4. # of clients served by program: In 2013, local-level projects funded via contract with N-MIECHV served approximately 300 at-risk families with intensive, comprehensive, sustained home visiting services.
5. Total Budget Amount: Federal formula funds \$1,000,000 annually; Federal competitive development funds \$1,543,572 for FFY 2012-2013 and \$912,030 for FFY 2013-2014; State general fund allocation was \$850,000 in SFY 2012-2013, increasing to \$1,100,000 in 2013-2014. Funding allocation requests are pending in Sept. 2014, with new applications for funding due in Oct. and early Nov.
6. Federal Funds: Yes
\$2,543,572 FFY 2012-2013; \$1,912,030 FFY 2013-2014
% of Budget: 75% in 2012-2013; 63% in 2013-2014.
7. State General Funds: Yes
In 2012-2013, \$850,000. In 2013-2014, \$1,100,000 The entire general fund allocation is issued in contracts for local-level service delivery.
% of Budget: 25% in 2012-2013; 37% in 2013-2014.
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: Contracts are issued to public and private or non-profit organizations for local-level service delivery or for program activities and services to enhance operations. In the former category, local public health departments including Panhandle Public Health District, West Central District Health Department, Douglas County Health Department, and Lincoln Lancaster County Health Department are contractors for federally supported evidence-based home visiting service delivery. Three contracts for state General Funds supported services expire October 31, 2013. Contractors are: Visiting Nurses Association, Northeast Nebraska Community Action Partnership and Lincoln-Lancaster County Health Department. A Request for Proposals for the contract period beginning November 1, 2013 was released September 4, 2013. Sub-recipients include NE Nebraska Community Action Partnership, Visiting Nurses Association (Omaha) and Public Health Solutions of Crete.

N-MIECHV also contracts with UNMC College of Public Health for a one-year Social Marketing and Messaging project; with UNMC Munroe-Meyer Institute for an extensive two-year evaluation project; with UNL-Extension Services for an implementation and evaluation activity conducted using a community-level assessment tool to identify priorities for mental health systems development and action planning. The program currently has short-term contracts as well with Nebraska Children and Families Foundation and with Bluestem Interactive for facilitation services.

11. Grant awarded by program: Not previously. Effective mid-2014, the program has converted business practices to issue Subgrants rather than contracts.

12. Mandated services:

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Federal funders have provided rigorous requirements for the delivery of approved evidence-based home visiting services, accompanied by data system development to measure achievement of benchmark measures of effectiveness and to support continuous quality improvement practices.

14. Additional information:

http://dhhs.ne.gov/publichealth/Pages/lifespanhealth_home_visitation_home-visiting-needs-assessment.aspx

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eureka with Kathy Northrop

Contact #: 402-471-0196

1. Program name, mission, description, history:

Nebraska Early Hearing Detection and Intervention Program

Mission: The Nebraska Early Hearing and Detection Program develops, promotes and supports systems to ensure all newborns in Nebraska receive hearing screenings, family-centered evaluations and early intervention.

Description: As per Neb. Rev. Stat. §71-4735, the Program supports systems of care to detect hearing loss in newborns and follow-up audiologic evaluations, treatment, and intervention services to prevent or mitigate the developmental delays and academic failures associated with late detection of hearing loss and to provide the state with information necessary for planning and evaluation of services. Activities include monitoring the hearing screening status of all newborns, tracking the follow-up services for those who do not pass and/or have a permanent congenital hearing loss, developing and maintaining an electronic data reporting and tracking system, analyzing data and providing quality assurance reports; providing educational materials for parents and professional development opportunities for providers, organizing and coordinating service systems, and engaging stakeholders in the development and evaluation of the program.

History: The program was established in 2000, as required by Neb. Rev. Stat. §71-4735.

2. Program manager, phone number: Kathy Northrop, MCRP, AICP, is the program manager for the Nebraska Early Hearing Detection and Intervention Program. Phone number is 471-6770.
3. # of State Employees: 4.4 FTE (2.0 permanent FTE, 1.0 contracted FTE, .90 temporary FTE)
4. # of clients served by program: Approximately 27,000 newborns annually
5. Total Budget Amount: \$356,782
6. Federal Funds: Yes

\$356,782

% of budget: 100%

7. State General Funds: No

8. State Cash Funds: No

9. Specified Tax Source: No

10. Contract with private providers for services: Yes

Providers: 3

- Kelly Brakenhoff - \$4,870.00 (Interpreter Services at Advisory Committee Meetings) (\$45/hour up to 48 hours and a maximum of 1,000 miles)
- Children's Hearing Aid Bank/HearU Nebraska - \$33,264.00 (Purchase of loaner hearing aids, supplies and repairs, and authorized reimbursements to licensed audiologists for supplies and services related to the fitting of individual loan hearing aids and management of the hearing aid bank.)
- University of Nebraska-Lincoln \$0 (OAE hearing screener on loan to perform hearing screenings)

Clients served: As above

11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: Neb. Rev. Stat. §71-4735

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: Evaluation components and performance assessments are incorporated and required by the funders (Health Resources Services Administration, Centers for Disease Control and Prevention).

14. Additional information:

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eurek with Barb Packett

Contact #: 402-471-0196

1. Program name, mission, description, history

Nebraska Elemental Food Reimbursement Program

Mission: Implement LB 254 which establishes the Nebraska Elemental Food Reimbursement Program to provide amino acid-based elemental formulas for the diagnosis and treatment of Immunoglobulin E and non-Immunoglobulin E mediated allergies.

Description: Nebraska residents with certain medical conditions that require medically necessary amino acid-based elemental formulas may receive reimbursement of up to fifty percent (50%) out-of-pocket expenses for these formulas. A maximum reimbursement amount is \$12,000 is available in a twelve month period. Formula reimbursement is on a first-come, first-served basis.

History: The Nebraska Elemental Food Reimbursement Program was created under LB 254 (2014) on July 1, 2014.

2. Program manager, phone number: Barb Packett, NE DHHS Food Distribution Coordinator (402) 471-0189
3. # of State Employees: 0.1
4. # of clients served by program: As of September 1, 2014, four (4) clients have been enrolled in the program.
5. Total Budget Amount: \$10,000 – OPERATING
\$250,000 - AID
6. Federal Funds: No

% of budget: 0
7. State General Funds: Yes

8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
 - State: YES
 - Statute citation: NRS 68.158
 - Federal: No
 - Oversight agency: Nebraska Department of Health and Human Services
 - Regulation citation: n/a
13. Evidence-based performance assessment process in place by program: No
 - Describe:
14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Julie Luedtke

Contact #: 402-471-0196

1. Program name, mission, description, history

Nebraska Newborn Screening & Genetics Program

Mission: To identify newborns at risk for inherited conditions (29 metabolic, endocrine, hematologic, genetic and immunologic), and assure follow-up and provision of services including special metabolic formula and foods to prevent mental retardation, other disabling conditions and infant mortality.

Description: The program manages the system of newborn “blood-spot” screening for inherited conditions via regulations, contracts and policy. The program provides professional and parent education, manages contracts for laboratory testing services and access to treatment and consultation services for families of affected newborns. Follow-up personnel monitor, track and ensure health professionals and families follow-up with additional testing and entry into treatment as needed. The program manages an active quality assurance and technical assistance program, and benefits substantially from technical expertise and advice from the Newborn Screening Advisory Committee.

History: The program began in the early 1960s, and has evolved from screening a single metabolic condition (PKU) to 28 metabolic, endocrine, hematologic and genetic conditions. The program screens for 29 of the 29 nationally recommend conditions that can be screened on the blood spots.

2. Program manager, phone number: Julie Luedtke, 402 471-6733
3. # of State Employees: 4
4. # of clients served by program: 26-27,000 births/year and their parents, 64+ birthing facilities and lab/nursery personnel, 1500+ health care professionals
5. Total Budget Amount: \$822,000 (FY13 – I don’t have anything telling me for sure what I have for Title V for FY 14)
6. Federal Funds: Yes
\$ 522,000

- % of budget: 63%
7. State General Funds: Yes
\$42,000
% of budget: 5%
8. State Cash Funds: Yes
\$ 260,000
% of budget: 32%
9. Specified Tax Source: No*
- * However, the law governing newborn screening (NebRevStat 71-519 through 71-524) authorizes a fee of \$10 per infant screened. The revenue generated by this fee has consistently been used to help pay for direct services of metabolic formula and pharmaceutically manufactured foods for people identified with screened inborn errors of metabolism.

\$ Amount: \$260,000-270,000 depending on # of births/year

10. Contract with private providers for services: Yes
Providers: 5
\$ contracted: varies **
Clients served: 27,000

**

A) Contract with private laboratory for newborn screening laboratory testing is no cost to the State. The laboratory bills the birthing facility or specimen submitter.

B) The 3 contracts with private pharmaceutically manufactured foods vendors are based on the State Statute which allows families up to \$2000/year/eligible individual for foods. In FY 15 this will be a single contract. Family food orders vary widely from year to year. But based on the # of individuals entitled, the maximum would be approximately \$162,500. Actual use in last few years ranged \$50,000-78,000.

In addition to these contracts with private providers, the program has three (3) contracts with the University of Nebraska Medical Center, as follows:

\$572,577, with the University of Nebraska Medical Center metabolic clinic for the ordering and distribution of metabolic formula to individuals. This contract also covers nutritional monitoring and counseling by a 0.982 FTE metabolic dietitian. The contract also covers consultation services to the program, of a .1 FTE Pediatric Metabolic Specialist (MD Geneticist). # served approximately 76 directly, plus approximately 100-200 consults/year.

\$20,959, with UNMC's Accredited Cystic Fibrosis Center to collaborate and assist on follow-up activities to ensure families with newborns suspected with Cystic Fibrosis have rapid access to diagnostic assessment and early entry into

treatment services. This contract also provides for consultation services to the Program of a Pediatric Pulmonologist. # served, approximately 50/year

\$2,182, with the University of Nebraska Medical Center for consultation services of a Pediatric Hematologist specializing in the hemoglobinopathies screened for in Nebraska. # served, approximately 40 consultations/year

11. Grant awarded by program: No

12. Mandated services

State: Yes

Statute citation: Neb.Rev.Stat. §§71-519 - 71-524

Regulation citation: (State) Title181, NAC 2 Regulations Governing Screening of Infants for Metabolic Conditions

Federal: No

13. Evidence-based performance assessment process in place by program: No

Describe: Evidence-based performance assessment would mean establishing a long term follow-up data system, not currently funded or authorized in the statute. This would evaluate outcomes of individuals screened and diagnosed over the long term.

The program has performance-based assessment of personnel. Staff also tracks multiple quality process-indicators. During the last two years, the program has begun requiring outcome reporting from the metabolic and CF Centers. Measurable patient outcomes are now being tracked and reported.

14. Additional information: The program also manages regulations for screening of Critical Congenital Heart Disease and distribution of parent education to hospitals on CCHD.

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eurek with Brenda Coufal

Contact #: 402-471-0196

1. Program name, mission, description, history

Nebraska Pregnancy Risk Assessment Monitoring System (PRAMS)

Mission: Reduce infant illness and death by influencing the health care systems and maternal behaviors that affect health before, during, and right after pregnancy.

Description: PRAMS is a monthly survey of new mothers from across the state; it partners with the Centers for Disease Control & Prevention (CDC), to identify and monitor selected maternal behaviors and experiences before, during, and right after pregnancy. The data is utilized in program planning and evaluation.

History: Nebraska PRAMS has been in operation since 1999.

2. Program manager, phone number: Brenda Coufal, 402-471-9044
3. # of State Employees: 2.0 (2.0 permanent FTE, 1.45 contracted FTE, .75 temporary FTE)
4. # of clients served by program: PRAMS does not provide direct services.
5. Total Budget Amount: \$253,764
6. Federal Funds: Yes
\$253,764
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: No, though program is operated in accordance with rigorous protocols established by the CDC.

Describe:

14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting & Michaela Meismer

Contact #: 402-471-0196

1. Program name, mission, description, history

Personal Responsibility Education Program (PREP)

Mission: Deliver evidence-based curriculum to Nebraska youth through local project sites.

Description: The program delivers the Teen Outreach Program model with fidelity, an evidence-based and federally-approved program curriculum evaluated as effective in improving youth health and social outcomes. The DHHS Adolescent Health Program Manager is certified as a TOP trainer and is the designated Nebraska TOP coordinator.

History: The Nebraska PREP program is supported by a 2010 federally-approved state plan, identifying risks of unintended pregnancy, school dropout, substance use, and other adverse outcomes. The TOP model is designed and deemed effective to improve protective factors and positive outcomes for youth.

2. Program manager: Michaela Meismer, Adolescent Health Program Manager I.
3. # of State Employees: This funding source accounts for 0.3 FTE of the Adolescent Health program manager position.
4. # of clients served by program: Approximately 125 youth served across all sub-grantee locations combined. Local sites deliver the evidence-based curriculum to youth over a nine-month period of weekly sessions.
5. Total Budget Amount: \$282,627 in 2014
6. Federal Funds: Yes
\$282,627
% of Budget: 100%
7. State General Funds: No
8. State Cash Funds: No

9. Specified Tax Source: No
10. Contract with private providers for services:
11. Grant awarded by program: Yes – six sub-grantees delivering the TOP evidence-based curriculum.
12. Mandated services:
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: Yes.
- Describe: The TOP model is an evidence-based curriculum that is delivered with fidelity and a data system designed to measure impact and effectiveness.
14. Additional information:
http://dhhs.ne.gov/publichealth/Pages/LifespanHealth_Adolescenthealth_index.aspx

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Rayma Delaney

Contact #: 402-471-0196

1. Program name, mission, description, history

Planning and Support

Mission: To improve the health of *all* mothers and children through the effective administration of the federal Title V / Maternal and Child Health (MCH) Block Grant funds awarded to DHHS.

Description: Subgrants are awarded to local community organizations sourced by the federal Title V / MCH Block Grant awarded to DHHS. The focus of this portion of the Title V/MCH Block Grant funding is at the community level on a selected set of priority needs to concentrate efforts and maximize outcomes. During the most recent competition, successful applicants addressed one or more DHHS-identified priority needs of the MCH population. Subrecipients' workplans are supported by promising-practice and evidenced-based strategies to provide some assurance that the activities will reach the long-term goals and outcomes. Other grant-related planning and management activities are also carried out by this program.

History: Since passage of the Social Security Act in 1935, the Federal Government has pledged its continuous support of Title V of the Act, making Title V the longest lasting public health legislation in United States history. The MCH Block Grant program was created by the Omnibus Budget Reconciliation Act (OBRA) of 1981. Under that legislation, a number of categorical grants programs were consolidated into the single MCH Block Grant program. Extensive amendments to the authorizing statute in 1989 increased State programmatic and fiscal accountability under the program. These include requirements for States to conduct activities to improve the health of all mothers and children consistent with health status measures and measurable objectives for program efforts as well as to report progress on key maternal and child health indicators. There are no eligibility requirements established at the federal level to qualify for services paid by Title V / MCH Block Grant.

2. Program manager, phone number: Rayma Delaney, Federal Aid Administrator III, 471-0197
3. # of State Employees: 1.0

4. # of clients served by program: 32,494 persons served through the sub-granted funds, as reported to the federal Health Resources and Services Administration (HRSA) in the 2013 annual report submitted July 2014. In addition activities to build and maintain infrastructure that are supported by these funds are not quantifiable.
5. Total Budget Amount: \$1,461,173
6. Federal Funds: Yes
\$ 1,461,173
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: Yes
Grantees: 16
\$ Grants: awards range \$43,195 - \$150,000; total awards of \$1,461,173
Clients served: 32,494
12. Mandated services:
State: No
Federal: No
Oversight agency: Health Resources and Services Administration (HRSA) and the Maternal and Child Health Bureau (MCHB)

Regulation citation: The MCH Block Grant is authorized by Title V of the Social Security Act of 1935, amended by OBRA of 1989 (PL 101-239), and is codified at 42 U.S.C. 701-709. The implementing regulations for this and other HHS block grant programs are published at 45 CFR 96.
13. Evidence-based performance assessment process in place by program: No, however, assessment of process and quality is established.

Describe: Public health outcomes are typically long-term. While Subrecipients' proposed activities are based on promising-practice and evidence-based strategies, the assessment of performance is a more feasible assessment that measures incremental progress which, if achieved, will likely lead to long-term outcomes (results). The performance of these two-year funded grants focuses on process and quality indicators. Subrecipients' workplans and subsequent reports use performance

measures to assess whether progress is on-track for likely achievement of eventual outcomes.

14. Additional information:

None

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Melissa Leypoldt and Jeri Weberg-Bryce

Contact #: 402-471-0196

1. Program name, mission, description, history

Public Health Screening

Mission: Increase preventive services

Description: Provides cervical cancer screening to low income women and sexually transmitted disease testing and treatment to low income women and men.

History: These services have been specified in State of Nebraska appropriations bills under Program 514 Health Aid since SFY1992. Until SFY 2007, the funds and services were administered in conjunction with the federal Title X/Family Planning program. In SFY 2007 and part of SFY 2008, these services were administered as a stand-alone program. Since November 2007 to the present, these funds and services are administered within the Breast and Cervical Cancer Program and the STD Program.

2. Program manager, phone number: Melissa Leypoldt, RN, Breast and Cervical Cancer Screening Program Manager, (402) 471-0314
Jeri Weberg-Bryce, STD Program Manager, (402) 471-6459
3. # of State Employees: None
4. # of clients served by program: 2,000 receive Pap smears and office visits for STD testing, 42,000 receive STD tests, and over 6,000 receive STD Treatments per year
5. Total Budget Amount: \$650,507
6. Federal Funds: No
7. State General Funds: Yes
\$ 650,507
% of budget: 100%
8. State Cash Funds: No

9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: 110 for cervical cancer screening, 78 for STD testing and treatment
\$ contracted: reimbursement for costs of cervical cancer screening; allocated STD tests and treatment
Clients served: 2,871 received Pap smears and office visits for STD testing; 42,000 for STD tests, and 6,000 for STD treatments
11. Grant awarded by program: No
12. Mandated services
State: No, but funds are specifically appropriated in the current state budget. via LB 315 (2009)
Statute citation: LB 315 (2009)
Federal: No
13. Evidence-based performance assessment process in place by program: No
14. Additional information:

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eurek with Julie Reno

Contact #: 402-471-0196

1. Program name, mission, description, history

Reproductive Health Program

Mission: Provide individuals the information and means to exercise personal choice in determining the number and spacing of their children.

Description: The **Nebraska Reproductive Health** administers the Title X Family Planning grant. The Public Health Service Act (1970) authorizes this grant “to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services”.

History: Title X/Family Planning grants were first authorized federally in 1970, and the Nebraska Department of Health began administering the grant program shortly after that year.

2. Program manager, phone number: Julie Reno, 402-471-0163
3. # of State Employees: 2.8
4. # of clients served by program: 26,159 unduplicated clients in CY2013
5. Total Budget Amount: **\$2,401,070** for FY2013-2014 (*Total includes \$150,000 internal MCH allocation, competitive Title X carve out award of \$220,000 for Health Information Technology and remainder is Federal Title X award of \$2,031,070*)
6. Federal Funds: Yes
\$ 2,401,070.00
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No

9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: Yes
Grantees: 12
\$ Grants: \$1,823,123 for FY 2013-2014
Clients served: 27,704 unduplicated clients in CY2012
12. Mandated services
State: No
Federal: No
Oversight agency: US HHS Office of Population Affairs
Regulation citation: 42CFR Part 59, Subpart A
13. Evidence-based performance assessment process in place by program: Yes

Description: The Title X Family Planning Program has a well-developed process for promotion and assessment of the integration of ‘evidence based’ and ‘best practice’ technique into the Title X service delivery system.

Continuous follow-up is maintained by the contracted clinical nurse consultant to assure that clinical services are provided according to current national medical practice guidelines.

Title X clinic personnel are provided continuous training opportunities through the integrated training program managed through Nebraska Reproductive Health. Each year an extensive needs assessment determines specific training needs, training is developed that exposes Title X staff to evidence-based practice research and its integration into the clinic and education programming, and further follow-up is required to assure its implementation statewide.

14. Additional information:

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 10, 2014

Prepared by: Paula Eureka with Jennifer Severe-Oforah

Contact #: 402-471-0196

1. Program name, mission, description, history

State Systems Development Initiative

Mission: To improve data capacity for the Maternal and Child Health (MCH) programs, partners, and population.

Description: SSDI is a federal grant that supports maternal and child health epidemiology and surveillance activities for Nebraska, assures compliance with federal reporting requirements, and provides assessment and planning for MCH populations.

History: The federal State Systems Development Initiative (SSDI) grant program was established in 1993.

2. Program manager, phone number: Jennifer Severe-Oforah 471-2091
3. # of State Employees: 1.0
4. # of clients served by program: not applicable
5. Total Budget Amount: \$105,511
6. Federal Funds: Yes
\$100,000
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No

11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No, but the data collected and analyzed by the program is part of federal reporting requirements.

Oversight agency: Maternal and Child Health Bureau, Health Resources and Services Administration, US DHHS

Regulation citation: Federal law, Social Security Act, Title V, Section 501(a)(2-3); 42 USC 701

13. Evidence-based performance assessment process in place by program: Yes

Describe: Program is required to report on annual performance measure #9A of the Title V/MCH Block Grant, which measures the ability of States to assure the MCH program and Title V agency have access to policy and program relevant information and data.

14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 12, 2014

Prepared by: Paula Eurek with Kathy Karsting

Contact #: 402-471-0196

1. Program name, mission, description, history

TANF: Services for women who are pregnant or who believe they might be pregnant. (The previous project period ended June 30, 2014, and the project is not currently active in Sept. 2014.)

Mission: Promote healthy pregnancies and birth outcomes. 9/12/2014: The project was intended to fulfill TANF purpose statement #3: Prevent and reduce the incidence of out-of-wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies.

Description: Through a contract supportive services were provided to women and infants. A substantial portion of the allocation went to public messaging project, "Positive Alternatives."

History: Services first initiated as a pilot program under Section 86 of LB425 in 2005. The allocation derives from state determination of a portion of federal TANF funds received to accomplish specified preventive services.

2. Program manager: Kathy Karsting, RN, MPH MCAH Program Manager II

3. # of State Employees: 0.0

4. # of clients served by program: This program averages 450 clients per year.

5. Total Budget Amount: \$250,000 **As of Sept. 2014, no active project.**

6. Federal Funds: Yes
\$250,000
% of Budget: 100%

7. State General Funds: No

8. State Cash Funds: No

9. Specified Tax Source: No

10. Contract with private providers for services:

Number of providers: One contract with Nebraska Children's Home Society

\$ contracted: \$250,000

of clients served: In 2012-2013, Nebraska Children's Home Society reported direct contact with 16,791 individuals, providing services or learning opportunities.

11. Grant awarded by program: No

12. Mandated services:

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: Yes

Describe: The evaluation methodologies include: post-service exit evaluations, participant satisfaction measures, results of pre- and post-tests in educational activities, demographic summary of clients served, and use of evidence-informed curricula.

14. Additional information:

None.

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Peggy Trouba & Susan Schoen

Contact # 402-471-0196

1. Program name, mission, description, history

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

Mission: Through a combination of education, nutritious foods, and referrals, WIC makes a positive difference during critical times of growth and development.

Description: WIC is administered federally by the US Dept. of Agriculture. WIC is a public health nutrition program established nationally in 1972 to improve nutrition in pregnancy and early childhood. WIC serves pregnant and postpartum women, infants, and children under age five that are considered at nutritional risk. WIC provides services at no cost to clients including: nutrition and health education; breastfeeding education, promotion, and support; supplemental foods and referrals for other services that may be needed. Income eligibility is 185% of the federal poverty level. Women, infants, and children are automatically income eligible while participating in: Medicaid, Food Stamps (SNAP), or Aid to Dependent Children (ADC). Foster Children under five years old that are receiving Medicaid are also income eligible for WIC.

History: WIC services have been available in NE since 1975.

Separate funding is provided through WIC for a Breastfeeding Peer Counseling Program available at specific WIC local agencies.

The WIC Program has received funding through a WIC Technology grant for a Management Information System (MIS) implementation and Electronic Benefit Transfer (EBT).

2. Program manager, phone number: Peggy Trouba, 402-471-2781
3. # of State Employees: 10.05
4. # of clients served by program: 39,654 in August 2014

5. Total Budget Amount: \$53,160,194 received in 2014 for food, NSA, estimated rebates, Breastfeeding Peer Counseling and the MIS and EBT projects.
6. Federal Funds: Yes
\$44,638,056
% of budget: 84%
7. State General Fund: No
8. State Cash Funds: Yes
\$8,522,138 received as infant formula rebates which are required by USDA
% of budget: 16%
9. Specified Tax Source: No
10. Contract with private providers for services: Yes
Providers: approx. 10
\$ contracted: estimate \$622,968 payments; \$8,567,700 in collected rebates
Clients served: Contracts are for program operations, not for direct services.
Contracted services include banking/check processing, infant formula/rebates, vendor compliance investigations, sub-grantee financial monitoring, computer system support and MIS & EBT projects.
11. Grant awarded by program: Yes
Grantees: 13 sub-grants with local non-profit and government agencies
\$ Grants: \$9,032,450
Clients served: 39,654 in August 2014
12. Mandated services
State: No
Federal: No
Oversight agency: USDA
Regulation citation: 7CFR Part 246
13. Evidence-based performance assessment process in place by program: Yes

Describe: Program performance measures are used; federal program evaluations are conducted by USDA
14. Additional information:

**DHHS Program Data and Information Form
Lifespan Health Services Unit**

Date: September 12, 2014

Prepared by: Paula Eurek

Contact #: 402-471-0196

1. Program name, mission, description, history

Unit Administration, Lifespan Health Services Unit

Mission: Promote the health and well-being of Nebraskans throughout their lifespan.

Description: Planning, program development, quality assurance, and oversight of financial and program operations. Partnership development and coordination across programs.

History: The Lifespan Health Services Unit was formed July 2007, combining the former Office of Family Health with the Office of Women's Health.

2. Program manager, phone number: Paula Eurek, Unit Administrator, 402-471-0196
3. # of State Employees: 2.2
4. # of clients served by program: Not Applicable
5. Total Budget Amount: \$158,124
6. Federal Funds: Yes
\$158,124
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

13. Evidence-based performance assessment process in place by program: No

Describe:

14. Additional information:

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek with Melissa Leypoldt

Contact #: 402-471-0196

1. Program name, mission, description, history

WISEWOMAN

Mission: Provides preventive services related to cardiovascular disease and diabetes for eligible women.

Description: Extends services that are provided to women as part of the National Breast and Cervical Cancer Early Detection Program. Women aged 40-64 receive screening services for cardiovascular risk factors and diabetes. The program also provides lifestyle interventions that are tailored to each woman's heart disease and stroke risk factors screening results and her readiness to make lifestyle behavior changes.

History: This program has been funded in Nebraska by the Centers for Disease Control and Prevention since 2001.

2. Program manager, phone number: Cathy Dillon, (402) 471-1806
3. # of State Employees: 2.6
4. # of clients served by program: 4,200 WISEWOMAN clients projected to be served in the current fiscal year
5. Total Budget Amount: \$737,700
6. Federal Funds: Yes
\$737,700
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No

10. Contract with private providers for services: Yes

Providers: 800

\$ contracted: \$166,059

Clients served: 4,200

11. Grant awarded by program: No

12. Mandated services

State: No

Federal: No

Oversight agency: Centers for Disease Control and Prevention

Regulation citation:

13. Evidence-based performance assessment process in place by program: Yes

Describe: The Centers for Disease Control and Prevention requires semi-annual data submissions and evaluates the program according to established standards.

14. Additional information: WISEWOMAN operates as an integrated entity within the Breast and Cervical Screening Program (Every Woman Matters) to provide comprehensive and quality clinical care and education to Nebraska women.

DHHS Program Data and Information Form Lifespan Health Services Unit

Date: September 10, 2014

Prepared by: Paula Eurek & Tina Goodwin

Contact #: 402-471-0196

1. Program name, mission, description, history

Women's Health Initiative

Mission: Helping women and families lead healthier lives.

Description: Created by Nebraska Revised Statute §§ 71-701 through 71-707, the Women's Health Initiative fosters development of a comprehensive system of coordinated services, policy development, advocacy, and education.

History: The Women's Health Initiative was created by the Legislature in 2000 to:

- (1) Serve as a clearinghouse for information regarding women's health issues, including pregnancy, breast and cervical cancers, acquired immunodeficiency syndrome, osteoporosis, menopause, heart disease, smoking, and mental health issues as well as other issues that impact women's health, including substance abuse, domestic violence, teenage pregnancy, sexual assault, adequacy of health insurance, access to primary and preventative health care, and rural and ethnic disparities in health outcomes;
- (2) Perform strategic planning within the Department of Health and Human Services to develop department-wide plans for implementation of goals and objectives for women's health;
- (3) Conduct department-wide policy analysis on specific issues related to women's health;
- (4) Coordinate pilot projects and planning projects funded by the state that are related to women's health;
- (5) Communicate and disseminate information and perform a liaison function within the department and to providers of health, social, educational, and support services to women;
- (6) Provide technical assistance to communities, other public entities, and private entities for initiatives in women's health, including, but not limited to, community health assessment and strategic planning and identification of sources of funding and assistance with writing of grants; and
- (7) Encourage innovative responses by public and private entities that are attempting to address women's health issues

In 2013, Women's Health Initiative activities have been organizationally placed with other initiatives relevant to the Lifespan Health Services Unit, such as health literacy and life course health strategies.

2. Program manager, phone number: Tina Goodwin RN, BSN, CLC 402-471-3914
3. # of State Employees: 2.8
4. # of clients served by program: not applicable; population-based services
5. Total Budget Amount: \$194,500
6. Federal Funds: Yes
\$194,500
% of budget: 100%
7. State General Funds: No
8. State Cash Funds: No
9. Specified Tax Source: No
10. Contract with private providers for services: No
11. Grant awarded by program: No
12. Mandated services
State: No
Federal: No
13. Evidence-based performance assessment process in place by program: No
14. Additional information:

Table of Contents
Vital Records Unit

Vital Records Office1

DHHS Program Data and Information Form

Date: September 9, 2014

Prepared by: Stanley S. Cooper

Contact # (402) 471-0915

1. Program name, mission, description, history

Program Name: **Division of Public Health --Vital Records Office**

Mission: To register vital events (birth, death, marriage, dissolution of marriage and fetal death) occurring in Nebraska. To maintain and issue certified copies of vital event records and collect statistical data which is distributed through the Health Statistics Office to local, state and federal programs.

Description/History:

The Vital Records Office has been the Nebraska's repository of birth and death records since 1904 and marriage and dissolution of marriage since 1909. Over six million records are on file. Additionally, the Vital Records Office is responsible for registering adoptions, Delayed Birth Certificates, and abortion reports. These records are issued to the appropriate requestors. The Vital Records Office also maintains the Biological Father Registry, which helps biological fathers in claiming paternity and Vital Records staff also matches and flags birth and death records to help prevent unauthorized use of individual records.

Certified Vital Records are issued to customers to obtain driver licenses, passports, enroll in school, obtain social security, retirement benefits, and more. Nearly 150,000 certified records are issued annually. Nearly 19,000 birth records were requested on-line using the internet in 2009-2012.

As part of the state initiative to go green and automate systems DHHS introduced registration of vital records through its Electronic Vital Records System in 2005. Beginning in 2005 all new birth records were registered electronically. In 2006, DHHS introduced a volunteer means to electronically file death records. As of December 31, 2009 60% of death records are being initiated electronically. All dissolution of marriages were being filed electronically effective January 1, 2007. With the introduction of the marriage abstract in 2007, a fully electronic marriage license and paper license was made available to the public.

Nearly 90% of all vital records are initiated through the DHHS's Electronic Registration System. The Office continues to review options to

expand electronic functionality to make records more easily obtainable to assist in providing optimal customer service.

2. Program manager, phone number
Stanley Cooper, Vital Records Administrator (402) 471-0915
3. # of State Employees 21.33
4. # of clients served by program: All citizens who have vital events registered in Nebraska. There are over six million vital records on file.
5. Total Budget Amount \$1,797,724.00
6. Federal Funds \$16,090.00
7. State General Funds No
8. State Cash Funds \$ 1,781,634.00

9. Specified Tax Source No

10. Contract with private providers for services No

11. Grant awarded by program No
Grantees _____
\$ Grants _____
Clients served _____

12. Mandated services
State Yes
Neb. Rev. Stat. §§ 71-612-71-616.04, 28-343-344, 43-109-161, 71-626-71-627.02, 71-604.01-71-644, 43-104.01-104.03, 71-603.01-71-616.01, 71-617.01-71-617.15, 71-4814-71-4817, 43-2001-2012, 71-601.01-71-601.01, 71-602-71-603.01 and 71-649
Federal No
Oversight agency:
Regulation citation: Title 174- Vital Records

13. Evidence-based performance assessment process in place by program
Yes

Describe: Receive data quality feedback from NCHS on coding of death and fetal death records.

14. Additional information:
None

DHHS Program Data and Information Form
Division of Veterans' Homes
Fiscal Year 2013/14

Date: September 10, 2014

Prepared by: John Hilgert, Director

Contact #: 402-471-7762

1. Program name, mission, description, history

Program Name: Division of Veterans' Homes

Mission:

- 1) Provide quality care services to veterans and their eligible dependents.
- 2) Assist member to maintain wellness and maintain and/or improve their levels of functioning
- 3) Operate our long-term care facilities in Scottsbluff, Grand Island, Norfolk, and Bellevue at or near full capacity.
- 4) Provide management of the Veterans' Home System.

Description:

The Division of Veterans' Homes operates four long-term care facilities for eligible veterans, their dependents and Gold Star Parents in Bellevue, Grand Island, Norfolk and Scottsbluff, and provides management of the Veterans' Home System. Services in the Veterans' Homes include United States Department of Veterans Affairs' (USDVA) recognized levels of care, including skilled nursing and domiciliary care. Other accessible services offered at the homes include planned group activities; physical, occupational and speech therapy; and memory and palliative care. The primary purpose of the Veterans' Homes is to provide a level of care to each member which meets their individual physical and/or mental health needs.

History:

Nebraska's first veterans' home was founded in 1887. Today, the Veterans' Homes are part of the Nebraska Department of Health and Human Services (DHHS). State statutes determine applicant eligibility and the Veterans' Home Board determines charges. Board members include appointed representatives from the recognized Nebraska veterans' service organizations.

2. Program manager, phone number: John Hilgert, Director, 402-471-7762

3. # of State Employees: Total: 1,157 positions
a. 916 permanent positions
b. 241 temporary positions
4. # of clients served by program 556 (as of 6/30/14)
5. Total Budget Amount \$55,476,604.00
6. Federal Funds x yes no
 \$18,954,263.00
 % of budget 34%
7. State General Funds x yes no
 \$23,726,342.00
 % of budget 43%
8. Cash Funds x yes no
 \$12,795,999.00
 % of budget 23%
9. Specified Tax Source yes x no
 Name N/A
 \$ Amount N/A
10. Contract with private providers for services X yes no
 # Providers 37
 \$ contracted \$2,429,975
 # Clients served 556 (as of 6/30/14)
11. Grant awarded by program yes x no
 # Grantees N/A
 \$ Grants N/A
 # Clients served N/A
12. Mandated services
 State x yes no
 Statute citation: 80-314 - 80-331
 Federal yes no
 Oversight agency: United States Veterans Affairs
 Regulation citation: Title 38, part 51

13. Evidence-based performance assessment process in place by program

 X yes no

Describe: The Veterans Homes use a Monthly Quality Indicator Report and Key Performance Indicators.

Each Veteran Home inputs member care data which is used to identify, monitor and improve member care issues. The Veterans home data is also compared with State and National data. All the homes have a Quality Assessment Performance Improvement program that assists to identify and correct home or survey issues.

Each Veterans Home also tracks financial information to identify areas of concern and recognize trends. This data is used to forecast budget numbers.

14. Additional information: None

Do not write below this line

HEALTH AND HUMAN SERVICES COMMITTEE MEMBER COMMENTS: